"You Only Pray that Somebody Would Step In":

Mapping the Gaps Between Expert and Public Understandings of Elder Abuse in America

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I. Introduction

Elder abuse is an issue that has continually struggled to rise to prominence on our national agenda. Despite apparent breakthroughs, such as the passage of the Elder Justice Act in 2010, momentum has been difficult to sustain, and the issue remains low on the list of public priorities. The Elder Justice Act is underfunded, and resources for state and local Adult Protective Services remain woefully insufficient. While elder abuse receives some media coverage and advocates work tirelessly to bring attention to the issue,[1] policymakers and the public largely ignore the issue in favor of other concerns.

Moving the problem of elder abuse up the list of public priorities and engendering a productive public conversation around the issue requires a new communications strategy. An effective reframing strategy can foster better understanding of the issue, raise its salience in public thinking, and generate support for needed policies. This report represents the first step in a larger research project to develop such a strategy. The project is funded by Archstone Foundation and the John A. Hartford Foundation, and is managed by Laura Robbins of Laura A. Robbins Consulting. The FrameWorks Institute is conducting this project in conjunction with a parallel collaborative project on reframing aging. The project on aging is in partnership with the Leaders of Aging Organizations, a group administered by Grantmakers in Aging that includes the AARP, the American Federation for Aging Research, the American Geriatrics Society, the American Society on Aging, the Gerontological Society of America, the National Council on Aging, and the National Hispanic Council on Aging.[2]

The first step in reframing elder abuse is gaining an understanding of the deep cultural patterns of thinking that shape how people reason about and make sense of this issue. This report analyzes how the public thinks about elder abuse and compares these patterns of thinking to the views of issue experts. By understanding how the public thinks about elder abuse, communicators can better predict how their messages are likely to be received, avoid triggering unproductive ways of thinking about the issue, and leverage productive understandings to get their message across. Moreover, identifying the places where public understandings consistently impede productive thinking about elder abuse lays the groundwork for future research by identifying those areas where strategies must be developed in order to successfully reframe the issue.

This report begins by describing the "untranslated expert story" of elder abuse. This account constitutes experts' shared understanding of the issue and outlines what elder abuse is, what causes it, its effects, and policies and programs that are needed to address the issue. *This untranslated story represents the content to be communicated to the public through a reframing strategy.*

The core of the report is a description of the cultural models[3]—the implicit, shared understandings, assumptions, and patterns of reasoning—that the American public draws upon to think about elder abuse. The report explains how cultural models of elder abuse are woven from different strands of public thinking, on topics including aging, abuse, modern life, government, and family. While dominant ways of thinking about elder abuse produce public concern about the issue, they also limit people's ability to think

productively about how to address the issue. Most notably, our research shows that the public struggles to see the issue as a collective problem that can and must be solved through collective action and public policy.

The final section of the report Maps the Gaps between expert and public views of elder abuse, identifying where these understandings overlap as well as where they diverge. This Map the Gaps analysis identifies the primary challenges in effectively communicating with the public about elder abuse. We conclude the report by charting a course for future research to address these challenges and to develop an effective, comprehensive strategy for communicating about elder abuse.

II. Executive Summary

The Expert View of Elder Abuse

The following points comprise the content that experts on elder abuse wish to communicate to members of the public. Together, these points represent the "untranslated story" of elder abuse. This distillation of the expert view was generated through the analysis of 10 one-on-one, one-hour phone interviews with advocates, policy experts, and researchers working on the issue.

What Is Elder Abuse?

Experts define elder abuse as mistreatment of or harm to an older person. The concept is understood slightly differently in different contexts (e.g., research, law, and service provision), but experts consistently identify physical abuse, emotional abuse, sexual abuse, neglect, and financial exploitation as types of elder abuse, and many experts also include self-neglect. Experts explain that what distinguishes elder abuse from abuse of younger adults are the vulnerabilities that may accompany the aging process. Elder abuse is, experts note, common but usually unreported, as roughly 10 percent of all older people experience elder abuse at some point.

What Causes Elder Abuse?

Although the causes of elder abuse are complex and type- and case-specific, experts identify clear risk factors for perpetrators (e.g., mental health problems, substance abuse, and financial stress), for victims (e.g., dementia, social isolation, and physical dependency), and for context (e.g., lack of caregiving support and history of conflict). Experts also point to American culture as a contributing factor, noting that ageism devalues older people and creates a context that is conducive to elder abuse.

What Are the Effects of Elder Abuse?

Experts explain that elder abuse has effects on both victims and society. Experts stress the lasting physical, emotional, financial, and behavioral effects on victims, while also highlighting the financial and moral costs of elder abuse for society.

How Should Elder Abuse Be Addressed?

While acknowledging that elder abuse is a challenging issue and noting that knowledge about what solutions work best is still evolving, experts agree on a set of actions that are urgently needed to better address the issue:

- Adult Protective Services must be better funded and reformed. More funding and better guidelines are needed for the public systems that respond to elder abuse.

- Community supports and human services for both caregivers and older adults must be strengthened. These supports and services can alleviate risk factors and address underlying causes of elder abuse.

- Multidisciplinary teams should be broadly instituted to ensure that services are coordinated and that the expertise of different groups is fully utilized.

- Public education and practitioner training can cultivate public awareness of the issue and ensure that relevant parties know how to handle cases of elder abuse.

- More research is needed to better understand which interventions and programs are most effective.

The Public View of Elder Abuse

The American public draws on a complex set of cultural models to make sense of elder abuse. To identify these models, FrameWorks researchers conducted and analyzed 20 in-depth, two-hour interviews with members of the public, in five locations. Analysis revealed the following implicit understandings and assumptions:

Elder + Abuse

Elder abuse is not a well-worn topic for the public, yet people are readily able to think through the issue by drawing upon understandings of the concept's component parts: "older age" and "abuse." Shared understandings of "abuse" allow people to quickly identify most types of elder abuse (with the exception of self-neglect, which does not fall within people's understanding of "abuse") and to recognize that abuse has severe and lasting effects. People draw on understandings of "older age" to reason about how abuse might be linked to older adults' vulnerabilities, yet the assumption that older people are nonsexual makes elder sexual abuse difficult to think about. The understanding of elder abuse as older age *plus* abuse can be leveraged to increase the salience of elder abuse, but can also be a ***toxic combo***, as problematic assumptions from the two domains can reinforce one another (e.g., victims of abuse and older people are both often assumed to be helpless).

Deterioration and Paternalism

The issue of elder abuse triggers models of older people as deteriorating and dependent and prompts paternalistic thinking. When thinking about elder abuse, people assume that it is up to younger people to make decisions *for* older people. When this mode of thinking is active, the public understands older people as objects to be cared for and protected, rather than as actors with voices and minds of their own. These understandings not only ***fuel ageism*** but also make it hard for the public to understand how older people's integration and participation in the community can help to prevent elder abuse.

Spotlight on Individual Perpetrators and Victims

When thinking about why elder abuse happens, members of the public often assume that causes lie in the characteristics of the perpetrator, the victim, or their relationship. In spotlighting individuals and their relationships, the model *occludes the role of systemic and social factors* in causing elder abuse—and of the importance of these factors in effectively addressing the issue.

Modern Life Is the Problem

At times, the public draws on a deep and shared understanding of modern life to explain elder abuse. When thinking in this way, the public traces elder abuse to fundamental changes in work and family life, suggesting that these changes have created stresses and burdens that make elder abuse more likely. While the model enables people to think about societal-level causes (cultural and social changes over time), it *reinforces a powerful sense of fatalism* about elder abuse by linking it to deep and seemingly unchangeable trends.

Everyone's Responsible, No One's Responsible

The public widely insists that "everyone" is responsible for addressing the problem of elder abuse, yet people hesitate to ascribe full or ultimate responsibility to any particular party. The vague idea that we are each responsible is, in practice, somewhat empty, leaving a vacuum in which no one is truly responsible. Put simply, people struggle to assign responsibility for this social issue. The responsibility vacuum—and unwillingness to assign responsibility to society collectively—*undermines the rationale for addressing elder abuse through public measures* and further reinforces fatalism.

Surveillance and Education

The public's main suggestions for dealing with elder abuse are to monitor caregivers and educate the public. Both suggestions are targeted at changing individual behavior. The public has much greater difficulty thinking about how solutions can address underlying social factors that contribute to elder abuse, and services to remediate the problem when it is identified are largely invisible. In short, public thinking about solutions is highly constrained and *renders key strategies to prevent and respond to elder abuse invisible*.

Gaps in Understanding

Analysis revealed a number of major gaps between expert and public understandings of elder abuse.

1. **Salience: Priority Problem vs. Off the Radar.** While elder abuse is a well-defined, urgent issue for experts, the public does not think of elder abuse as its own issue and devotes little attention and concern to it.

2. **Self-Neglect: Included vs. Excluded.** Many experts and organizations that deal with elder abuse treat self-neglect as a form of elder abuse, yet the public excludes self-neglect from the concept and assumes that the term "elder abuse" refers only to cases in which one person abuses another.

3. **Sexual Abuse: Explainable vs. Hard to Think.** Experts approach elder sexual abuse as a phenomenon that can be investigated and understood, while the public's discomfort and difficulty thinking about elder sexual abuse prevents constructive engagement with the topic.

4. **Older Americans: Subjects to Empower vs. Objects of Care.** Experts recognize older people as agents who can participate in their communities, while the public's deep paternalism toward older people prevents the public from recognizing the importance of engaging and empowering older people.

5. **Type of Explanation: Scientific vs. Moralized.** While experts adopt a scientific approach toward explaining elder abuse, the public tends toward moralized explanations of the problem that constrain public understanding of risk factors.

6. **Level of Explanation: Structural vs. Individualized.** To explain elder abuse, experts look beyond local context to structural factors, such as formal and informal systems of support. The public, by contrast, focuses primarily on attributes of the perpetrator and victim and largely fails to see how structures and systems shape context.

7. **Increased Mortality Risk: Known vs. Unknown Effect.** Experts highlight increased mortality risk as an established result of elder abuse, yet the public is unaware of this effect.

8. **Societal Effects: Salient vs. Unnoticed.** While experts stress the financial and moral costs of elder abuse for society, the public focuses almost solely on effects on victims and fails to recognize effects on society.

9. **Solutions: Systemic vs. Individualized.** Experts propose solutions that leverage systems and public institutions to prevent and respond to elder abuse. By contrast, the public seems largely unaware of relevant institutions, including Adult Protective Services, focusing instead on the need to change individual behavior.

10. **Locus of Responsibility: Collective vs. Everyone/No One.** Experts insist that the American people are collectively responsible for addressing elder abuse by acting in concert through shared public policies, structures, and institutions. By contrast, the public assumes that "everyone" is responsible for doing what he or she can, but that no one is truly responsible for dealing with the issue at the societal level.

11. **Orientation: Forward vs. Backward.** Whereas experts highlight the need for new research on elder abuse and the potential of innovative strategies to make progress in addressing the problem, the public bemoans changes in modern life that have made elder abuse more common and is pessimistic about the future.

12. **The Problem: Solvable vs. Unsolvable.** While experts identify a range of strategies to prevent and respond to elder abuse, the public is fatalistic about the problem, treating elder abuse as a problem that ideally would be, but cannot truly be, solved.

Tasks for Communication

Gaps between expert and public understandings suggest a set of specific tasks for communication—tasks that must be addressed in order to better align public understandings with the expert view. The following tasks comprise a prospective "to-do" list for future research.

1. **Cultivate thinking about older people as subjects.** Communications tools must be developed to counter negative stereotypes of older people as passive objects, in order to combat ageism and enable productive thinking about how elder abuse can be prevented by engaging and empowering older adults.

2. **Generate understanding of systems and institutions.** To circumvent localized, moralized understandings of causes of elder abuse and individualized thinking about solutions, communicators need tools to improve understanding of how systemic factors contribute to elder abuse and how institutional responses can help to address the problem.

3. **Promote a collective, public orientation towards solutions.** Communication strategies are needed to foster a collective sense of responsibility for the problem of elder abuse, to help the public see elder abuse as a societal problem that can and must be tackled through collective action.

4. **Put self-neglect on the map.** Members of the public do not think of self-neglect as a form of elder abuse. Strategies are needed to bring self-neglect into the conversation, either under the heading of elder abuse or as a twin concept.

5. **Boost the public's sense of efficacy.** Communicators need strategies to combat fatalism and increase the public's sense of efficacy—that is, enhance the sense that collective actions *can* be effective in preventing and successfully responding to elder abuse.

III. Research Methods

Expert Interviews

To explore and distill expert messages on elder abuse in America, FrameWorks researchers conducted 10 one-on-one, one-hour phone interviews with advocates, policy experts, and researchers working on the issue. These interviews were conducted in February–April 2015 and, with participants' permission, were recorded and subsequently transcribed for analysis. FrameWorks compiled the list of interviewees in collaboration with project partners at the Leaders of Aging Organizations. The final list was designed to reflect the diversity of disciplines and perspectives involved in work on elder abuse, including research, service delivery, policy, and law.

Expert interviews consisted of a series of probing questions designed to capture expert understandings about elder abuse including definition, causes, effects, and solutions. In each interview, the interviewer went through a series of prompts and hypothetical scenarios designed to challenge expert participants to explain their research and perspectives; break down complicated relationships; and simplify concepts and findings from the field. Interviews were semi-structured in the sense that, in addition to preset questions, interviewers repeatedly asked for elaboration and clarification, and encouraged experts to expand upon those concepts that they identified as particularly important.

Analysis employed a basic grounded theory approach. Common themes were pulled from each interview and categorized, and negative cases were incorporated into the overall findings within each category, resulting in a refined set of themes that synthesized the substance of the interview data. The analysis of this set of interviews resulted in the distillation of the expert perspective on elder abuse presented below.

Cultural Models Interviews

The cultural models findings presented below are based on 20 in-depth interviews conducted in five locations: Philadelphia, Pennsylvania; San Jose, California; Lancaster, California; Phoenix, Arizona; and Frederick, Maryland. Cultural models interviews — one-on-one, semi-structured interviews lasting two to two-and-a-half hours — allow researchers to capture the broad sets of assumptions, or "cultural models," that informants use to make sense of a concept or topic area. These interviews are designed to elicit ways of thinking and talking about issues — in this case, ways of thinking about older adults and elder abuse. Interviews covered initial associations with the term "elder abuse" and explored thinking about specific types of elder abuse, as well as thinking about perpetrators, victims, location, prevalence, causes, effects, responsibility, and solutions. As the goal of these interviews was to examine the cultural models that participants use to make sense of these issues, it was important to give them the freedom to follow topics in the directions they deemed relevant. Therefore, the researchers approached each interview with a set of

areas to be covered, but left the order in which these topics were addressed largely to the participant. All interviews were recorded and transcribed with written consent from participants.

Recruiting a wide range of people, and facilitating talk about concepts introduced by both the interviewer and the interviewee, allows researchers to identify cultural models that represent shared patterns of thinking. Participants were recruited by a professional marketing firm and were selected to represent variation along the domains of ethnicity, gender, age, residential location (inner city, outer city, and regional/rural areas up to three hours from city center), educational background (as a proxy for class), political views (as self-reported during the screening process), religious involvement, and family situation (married, single, with children, without children, age of children). The sample included 9 women and 11 men. Eleven of the 20 participants self-identified as "white," six as "black," one as "Asian," and two as "Hispanic." Eleven participants described their political views as "Middle of the Road," six as "Liberal," and three as "Conservative." The mean age of the sample was 46 years old, with an age range from 28 to 67. One participant was a high school graduate, seven had completed some college, nine were college graduates, and three had postgraduate education. Ten of the 20 were married, and 13 were the parent of at least one child.

Although we are not concerned with the particular nuances or differences in the use of cultural models between different demographic groups at this level of the analysis (an inappropriate use of this method and its sampling frame), we hope to consider such nuances through the use of other methods in subsequent research phases.

To analyze the interviews, FrameWorks' researchers adapted analytical techniques employed in cognitive and linguistic anthropology to examine how informants understand issues related to elder abuse.[4] First, researchers identified common, standardized ways of talking across the sample to reveal organizational assumptions, relationships, logical steps, and connections that were commonly made, but taken for granted, throughout an individual's talk and across the set of interviews. In short, the analysis concerns patterns discerned from both what was said (how things were related, explained, and understood) as well as what was not said (assumptions and implied relationships). In many cases, analysis revealed conflicting models that people brought to bear on the same issue. In such cases, one of the conflicting ways of understanding was typically found to be dominant over the other, in the sense that they more consistently and deeply shape people's thinking.

Below, we first present the expert messages that comprise an untranslated expert account of elder abuse in the United States. This is followed by an analysis of the cultural models that members of the public bring to understanding the issue. We then compare these expert and public understandings and identify key overlaps and gaps, and conclude with implications and areas of future research.

IV. Research Findings

The Expert View

Below, we present a distillation of the themes that emerged from the analysis of data from expert interviews.

1. What Is Elder Abuse?

- *Elder abuse is mistreatment of or harm to an older person.* While there was some disagreement among experts about the precise scope of the concept, experts agreed that elder abuse includes physical abuse, emotional abuse, sexual abuse, neglect, and financial exploitation. Many experts also considered self-neglect to be a form of elder abuse, although some experts excluded self-neglect. Most experts adopted an expansive understanding of perpetrators, indicating that mistreatment by anyone—including strangers—qualifies as elder abuse, although some experts held that cases only qualify as elder abuse if they involve mistreatment by a "trusted other," such as a family member or caregiver.

  Given the field's tendency to use a broad definition, we consider elder abuse to include self-neglect and mistreatment by strangers, while acknowledging that different definitions may be appropriate for different contexts.

- *Elder abuse is defined differently for different purposes.* Many experts argued that definitional disagreements stem, in part, from differences in perspective that accompany differences in organization and role. For example, because Adult Protective Services agencies in many states are responsible for cases of self-neglect, practitioners in this field tend toward a broad definition. By contrast, researchers tend toward narrower definitions and avoid definitions that lump together cases with different underlying causes and dynamics. Legal professionals adopt a pragmatic view, worrying less about the definition of the concept than the need to prevent and prosecute all forms of abuse.

- *The vulnerability of older people distinguishes elder abuse from other forms of abuse.* Experts asserted that elder abuse is distinguished by the vulnerabilities that can accompany the aging process. Older adults can become vulnerable as a result of cognitive impairment, decline in executive function skills, physical dependency, or lack of work income. While experts pointed to the vulnerabilities of older adults as something that differentiates *elder* abuse from other forms of maltreatment, they expressed reservations about emphasizing this point and worried that this idea reinforces ageism.

- *Most elder abuse happens at home.* Experts indicated that most elder abuse happens in the home and is perpetrated by family members, although it also happens in long-term care facilities and

other institutional locations and can be perpetrated by care workers, financial advisors, scam artists, and others.

- **Elder abuse is common but usually unreported.** Experts explained that the vast majority of elder abuse is unreported due to a combination of factors, including unwillingness to report family members, social isolation of victims, and lack of awareness among possible reporters. They cited estimates suggesting that roughly 10 percent of all older people experience elder abuse at some point, and that financial exploitation is likely the most common form of elder abuse. That translates to approximately 4.5 million people.

- **Different types of elder abuse often occur together.** Experts noted that it is common to see multiple types of abuse in the same case. The factors that lead to one type of elder abuse often produce other types as well.

2. *What Causes Elder Abuse?*

- **The causes of elder abuse are complex.** Experts argued that elder abuse cannot be attributed to any single cause, but rather is caused by the *interaction of factors.*

- **Causes are type- and case-specific.** Experts noted that while there are common risk factors, different types of elder abuse have different profiles. For example, financial exploitation is often motivated by financial need, while neglect is more likely to stem from caregiver stress or lack of adequate education. Similarly, causes are case-specific, as the particular constellations of factors responsible for abuse are tied to specific features of situations. For example, a history of conflict between perpetrator and victim might play a critical role in one case of neglect but no role in another.

- **There are clear risk factors.** Experts argued that risk factors for perpetrators include mental health problems, substance abuse, financial stress, lack of adequate education or training, and cognitive impairment or developmental disabilities. Risk factors for victims include dementia, behavioral problems (often tied to dementia), and physical dependency. A history of conflict between victim and perpetrator is another clear risk factor. Contextual risk factors include lack of caregiving support and social isolation.

- **Ageism creates a cultural context conducive to abuse.** Several experts emphasized that an ageist culture devalues older people, which both helps perpetrators rationalize their actions and depresses concern about elder abuse among police and prosecutors and within the broader society.

- **More research is needed to better understand causes.** Experts consistently stressed the limits of our current understanding of the causes of and solutions to elder abuse issues. They argued that

more research is needed to better understand risk factors, theorize and substantiate possible causal mechanisms, and identify how causes differ between different types of cases.

3. What Are the Effects of Elder Abuse?

- *The effects of elder abuse are multiple and severe.* Experts emphasized that elder abuse has lasting physical, emotional, financial, and behavioral impacts on older adults, and that victims typically experience multiple types of effects. Abuse can be especially devastating when perpetrated by family members, as the violation of trust can have deep emotional impacts. Experts noted that a common consequence of elder abuse is that people are put into institutional care.

- *Mortality risk increases as a result of abuse.* Experts consistently cited the increase in mortality risk that results from elder abuse: elder abuse causes a threefold increase in the risk of dying within three years.

- *Elder abuse is costly and damaging to society.* Experts highlighted the high healthcare and legal costs that result from elder abuse, which are often borne by public programs like Medicare and Medicaid. They also noted the high costs of placing victims in long-term care.

4. How Should Elder Abuse Be Addressed?

Experts acknowledged that elder abuse is difficult to address and that current knowledge about which solutions work best is limited. Addressing elder abuse is complicated by the reality that older people frequently do not want to report family members or expose them to possible prosecution. Moreover, victims frequently report the preference to stay in an abusive situation than be put into long-term care, and competent older people have the legal right to make this choice. On top of these practical challenges, the research base is currently insufficient to provide clear, evidence-based recommendations for all situations. Despite these challenges and limitations, experts agreed that several measures are crucial for better addressing elder abuse:

- *Fund and reform Adult Protective Services.* Experts universally stressed the need for better funding for the public systems that respond to elder abuse and argued that these services are currently underfunded. They noted how Adult Protective Services caseworkers typically have heavy caseloads that make it difficult to investigate cases with the care they warrant. In addition, several experts emphasized the need to rethink how Adult Protective Services agencies are organized and to develop better guidelines for effective provision of services.

- *Provide better community supports and human services.* Experts emphasized the need for better support within communities for both caregivers and older adults. Adult daycare and respite care can help alleviate caregiver stress. Senior centers, social activities for older people, and other programs that integrate older people into communities can prevent social isolation and ensure that there are people involved in the lives of older people who can detect abuse when it happens.

More generally, better funding for human services can ensure that families have access to services that provide general support (meals, transportation, etc.) and that address underlying causes of abuse (e.g., substance abuse, mental health, etc.).

- ***Institute multidisciplinary teams.*** Experts cited studies showing that multidisciplinary teams—which bring together Adult Protective Services, law enforcement and legal professionals, geriatricians and other medical professionals, and others—can have positive impacts on outcomes in elder abuse cases. These teams help ensure that the expertise of different groups is properly utilized and that services are optimally coordinated.

- ***Educate the public and train practitioners.*** Experts asserted the need to cultivate better public awareness about elder abuse, both to heighten understanding of and concern about the issue and to ensure that people report cases. Some experts also suggested instituting training programs for people who work in relevant fields: for care workers about how to handle difficult cases; for financial professionals to help them identify and intervene in cases of financial exploitation; for law enforcement officers to help them properly identify and respond to cases of elder abuse; and for healthcare professionals to identify and deal with cases of elder abuse among patients.

- ***Fund research.*** Experts argued that increased funding should be directed toward research to generate better understanding of which interventions and programs are most effective in preventing and responding to elder abuse.

Untranslated Expert Story of Expert Story of Elder Abuse

What is elder abuse?

- Elder abuse is mistreatment of or harm to an older person.

- Elder abuse is understood slightly differently in different contexts (research, law, service provision).

- What distinguishes elder abuse is vulnerabilities that are specific to older people.

- Elder abuse is common but usually unreported.

What are the effects?

- Elder abuse has severe and lasting physical, emotional, behavioral, and financial effects.

- Mortality risk increases as a result of abuse.

- Elder abuse is costly and damaging to society.

What are the causes?

- Causes are complex and type- and case-specific.

- Risk factors apply to perpetrators (e.g., substance abuse, mental illness), victims (e.g., dementia, social isolation), and context (e.g., lack of caregiving support).

- Ageism creates a cultural context that is conducive to elder abuse.

What should be done?

- Increase funding for and reform adult protective services.

- Improve community supports and increase funding for human services that address underlying causes.

- Institute multidisciplinary teams to enhance responses to elder abuse.

- Educate the public and train practitioners.

- Fund research to better understand causes and to ascertain which solutions are most effective.

The Public View

Below, we present the dominant cultural models—shared assumptions and patterns of thinking—that are most powerful in orienting and organizing the American public's view of elder abuse and that guide public thinking about the issue.

The cultural models that people draw upon to think about elder abuse include different, sometimes conflicting ways of thinking about the same issues. These cultural models represent ways of thinking that are *available* to the public, although different models are activated at different times. Some models are dominant, consistently shaping public thinking, while others are recessive, playing a less prominent role in public thinking.

⌜⌝ The **Elder + Abuse** Cultural Model

Elder abuse was not a top-of-mind concern for participants in cultural models interviews. The topic was rarely raised in participants' responses to interviewers' broad opening questions about what threatens older people's well-being. When interviewers asked questions about elder abuse specifically, most participants indicated some familiarity with this term, but they explicitly indicated or implicitly signaled that elder abuse is not a topic to which they had dedicated much thought.

Despite the issue's lack of salience, once interviewers raised the topic, participants were able to talk with relative ease and at length about elder abuse. This can be explained by the availability of cultural models about elder abuse's two component parts—older age and abuse. Assuming that elder abuse involves *abuse to older people*, participants drew on highly accessible models of *older age* and *abuse* to reason about elder abuse. In short, although elder abuse was not a well-worn topic for most people, participants could reason easily about it by drawing upon assumptions about the component parts of the term.

The modeling of elder abuse as a combination of two separate concepts—older age *plus* abuse—was occasionally evidenced through explicit comments, as in the following exchange.

> **Researcher**: There's an older couple. Throughout their marriage, the husband has beaten the wife. They are now in their '70s, and the domestic violence has continued. Is that elder abuse?
> **Participant**: Sure. It was regular abuse before. Now they're old. So now, it's just elder abuse. It was always abuse. Now, they're just older.

This modeling of elder abuse as the combination of older age *plus* abuse was more frequently evidenced implicitly, as participants drew on discrete assumptions about abuse and older age to cobble together an understanding of what elder abuse involves. By turning to distinct understandings of older age and abuse to make sense of elder abuse, participants implicitly showed that they

understand the two components of the term to be separate but easily integrated concepts. Participants borrowed the following distinct pieces from the separate domains of abuse and older age:

Cultural models of abuse informed participants' understanding of types of elder abuse and their description of its effects. Drawing on established understandings of abuse, participants quickly identified physical abuse, emotional or mental abuse, and neglect as types of elder abuse. Because the public's understanding of the concept of abuse assumes an abuser who perpetrates harm against a victim, participants did not identify self-neglect as a form of elder abuse. In addition, drawing on their understanding of abuse generally, participants universally reasoned that elder abuse must have a range of severe and durable effects on victims, including physical, psychological, and financial effects.

Cultural models of older people shaped thinking about the scope of elder abuse in crucial ways. Assumptions about older people heightened awareness of and attention to financial abuse. Models of older people as mentally declining and technologically incompetent[5] led participants to assume that older people are especially vulnerable to scams.

> **Participant**: The elderly are an easy target for theft, or just being taken advantage of [...] The elderly are so defenseless and especially with computers and identity theft, I think it's quite easy to take advantage of them.
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> **Participant**: The older generation, they may not have the mental capacity to keep up with their own finances, so they may not be aware of what's going on or be in control of what's going on.

By contrast, the deep understanding of older people as *nonsexual*, coupled with the assumption that sexual abuse is related to sexual desire, made elder sexual abuse extremely hard to think for participants. Not only did participants fail to think of sexual abuse as a type of elder abuse in response to initial questions, they typically greeted questions about elder sexual abuse with a mix of bewilderment and discomfort.

> **Researcher**: Is [elder sexual abuse] something that is a common problem or a less common form of elder abuse?
> **Participant**: I'd say it's probably a lot less common. I think just as we age, we're not—people aren't sexually active anymore, so I don't think that's that big of a problem. Yeah, I can't imagine it being one.
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> —
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> **Researcher**: So what about sexual abuse of older people? Would that be a form of elder abuse?
> **Participant**: I hope not. [*Laughter*]
> **Researcher**: Why do you say you hope not?
> **Participant**: Just doesn't paint a pretty picture in my head.

Implications

- **Existing understandings of abuse and its importance provide the basis for boosting the salience of elder abuse in public thinking.** Although elder abuse may not be on the radar for most Americans as a priority issue, the existing assumption that any form of abuse is bad and requires attention can likely be leveraged to quickly boost concern about elder abuse. As discussed below, however, concern alone is not sufficient to generate action, so boosting the issue's salience is only one step toward cultivating support for needed policies and programs.

- **Older age and abuse are a potentially toxic combo.[6]** While existing understandings of abuse have the potential to quickly increase the salience of elder abuse, assumptions about abuse and about victims also have the potential to exacerbate problematic stereotypes of older people. The common image of victims of abuse as powerless reinforces the assumption that older people are dependent and deteriorating (see *Deterioration* model below). The understanding of older adults as helpless is likely to fuel fatalism about elder abuse by making it seem inevitable that they will be taken advantage of by others.

- **The obstacles to productive thinking about elder sexual abuse are a serious problem.** When confronted with this issue, the public is likely to avoid serious engagement and deflect attention toward less uncomfortable topics. Communicators will need strategies for defusing public discomfort and for reframing sexual abuse as something that *can* and *does* happen to older people and that *can* and *must* be addressed.

- **The assumption that abuse always involves an abuser complicates thinking about self-neglect as a form of elder abuse.** Given people's default understanding of the concept, talk about elder abuse is likely to pull attention *away* from self-neglect. In order to prompt public consideration of the problem of self-neglect, communicators will need either to find strategies for remapping the public's default understanding of the concept of elder abuse to include things other than being abused by *someone else* or, more likely, to discuss self-neglect under its own heading (i.e., "elder abuse and self-neglect").

The **Deterioration** Cultural Model

In FrameWorks' recent research on aging, researchers identified a dominant cultural model that equates the aging process with deterioration. In that research, the *Deterioration* model was juxtaposed against a set of understandings about what the aging process ideally could or should entail that cast aging in positive terms.[7] In cultural models interviews on elder abuse, the topic of elder abuse consistently cued this underlying *Deterioration* model and with it the idea of dependency. Once the issue of elder abuse was broached, the aging ideal was quickly pushed aside, resulting in an exclusive understanding of older people as deteriorating, increasingly dependent persons who are vulnerable to abuse due to physical and cognitive weakness and impairment. The physical and mental vulnerability

of older people was assumed to be a foundational cause of elder abuse: elder abuse happens in part because older people are defenseless to protect themselves from it.

> **Researcher**: When you think about elder abuse, *whom* do you think about?
> **Participant**: Physically I see someone who is very aged. Who has limited mobility and has had some mental decline.
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> **Participant**: Older people, their mind is not sharp anymore, and it amazes me how older people can get suckered into things on the telephone.
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> **Participant**: Older people are easy targets. [...] I know there's a lot of sexual abuse in nursing homes and things like that. And some of them can't speak or they don't remember what happened yesterday. It's not like they can tell, so they are an easy target. Who is going to listen to someone who is old and has dementia and who forgets everything and doesn't know what anything is?

Implications

- **The *Deterioration* model reinforces fatalism.** The model creates the impression that elder abuse is impossible to prevent, because it is thought to result in large part from the natural and inevitable decline of older people into physical and mental dependency and weakness. While the model makes it easy for people to understand how older people become vulnerable to abuse, it short-circuits thinking about solutions.

- **The model denies older people agency.** The *Deterioration* model reinforces the tendency to treat victims of abuse as objects of harm rather than as subjects with voice and agency. Older people who are victims of elder abuse are treated as objects to be cared for rather than as agents to be consulted, engaged, and empowered.

⌜⌝ The *Paternalism* Cultural Model

The widespread understanding of older people as weak and dependent brings with it a deep and pervasive paternalism. When the *Paternalism* model was activated, participants assumed that it is up to younger adults—especially children, other family members, and nursing home staff—to make decisions about what should happen with older people. In this model, older people are objects to be acted upon rather than actors themselves.

This *Paternalism* model is a tacit one that is not expressed explicitly, yet researchers found strong evidence of it throughout interviews. For example, *Paternalism* is apparent in the frequent suggestion

to put video cameras in nursing homes or in older people's own homes, as a means of surveillance. This method is assumed to be acceptable because older people are not being thought of as subjects with full internal lives and correspondent needs for privacy, but rather only as objects to be protected.

> **Participant**: Going back to technology—nanny cams and stuff—can solve the case in the past. Maybe [use] that kind of stuff if there is suspicion of that going on.
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> **Researcher**: So you would like to see cameras in houses that had elderly people in order to protect the elderly?
> **Participant**: I guess. [...] Well, there are two sides. People are going to say this is—what do you call it?
> **Researcher**: Privacy?
> **Participant**: Yeah, inhibiting my privacy. But then again, I think there's probably more benefit than harm. If it's going to prevent abuse then I think it's probably better than not having it.

When using the *Paternalism* model, people understand elder abuse not as a violation of older people's agency but solely in terms of objective harm to their well-being. This is evident in how some participants responded to a hypothetical scenario involving financial abuse. These participants suggested that as long as the unauthorized use of someone's money does not harm them, nothing needs to be done about it.

> **Participant**: It's not abusive. He hasn't undergone any consequences of that as long as it doesn't affect him, any of the care he's getting, and it doesn't affect the decisions he's still able to make.
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> **Participant**: As you laid out the case, it's a wealthy individual. I've said the $20,000—in light of what you said—is chump change. The sister—the other sister addresses it with her. All those factors taken into consideration—even though for me, it is an issue of morality—it's an issue that can be handled within the family, because the repercussions are not deleterious, as you've described it, as a one-off.

These are two specific examples of a broader set of ways in which paternalistic thinking was woven throughout participants' thinking.

Implications

- **The *Paternalism* model leaves no space for older people's voice and participation**. Finding ways to consult older people and to solicit their opinions, foster greater participation of older people in community life, and demonstrate respect for older people is central to the approach toward elder abuse recommended by experts. By treating older people as objects rather than as subjects, the *Paternalism* model makes it hard for people to recognize the importance of

empowering older people in these ways. The model constrains thinking about solutions, leading people to focus solely on measures to alter perpetrators' behavior or to shield older people from harm through vigilant surveillance. Moreover, by reinforcing ageism the model contributes to the broader cultural climate that makes elder abuse more likely.

- **Paternalistic thinking exacerbates fatalism.** The model assumes that older people need to be constantly monitored and cared for by others—prototypically, by family members. Yet, as discussed below (see the *Everyone's Responsible, No One's Responsible* model), people resist the idea that anyone, including family, is wholly responsible for providing the required care and oversight. This makes it difficult to imagine how elder abuse can be prevented. People assume that constant oversight and care are needed to prevent elder abuse, and yet, at the same time, people assume that there is no party that can be tasked with that job.

The **Elders as Agents** Cultural Model

While participants most often treated older people as objects to be cared for and protected, they were capable of thinking about older people as subjects, as agents whose voice should be heard and who must be consulted about their own care—even when they are incapable of taking care of themselves without assistance. Notably, this model was triggered most frequently by a hypothetical scenario that was part of the interviews about an older woman with mild dementia involved in a sexual relationship with a younger man. When asked to consider the scenario, participants invoked familiar understandings about the need for consent in sexual relationships, which previous FrameWorks research has found to be dominant in thinking about sexual abuse.[8] People understand sexual abuse to be nonconsensual sexual activity, so the question of whether the hypothetical sexual relationship constitutes abuse led participants to think about whether the woman consented. The activation of this consent model situated the elder person as an agent to be consulted and empowered rather than as an object of care. In responding to this scenario, participants consistently talked about the importance of determining what the older woman wants, even if she ultimately lacks sufficient competence to consent.

> **Participant**: I think the woman has to be asked also. The patient has to be asked to ensure that, even if she has her faculties, does she feel she can't say no?
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> **Participant**: According to our government and everything else and everybody's rights and stuff, that's perfectly fine because she still has the ability to consent to whatever she wants. It's her body, it's her person [....] She could still make her decisions and that's her choice.
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> **Participant**: If he's coming in authorized and the consent is there, I don't think [it's elder abuse], no. That goes to a person's own preference, whatever floats their boat.

The *Elders as Agents* model is recessive and fragile; it can be pushed aside easily. If the *Paternalism* model is activated, the desire to protect vulnerable older people crowds out concern for their agency. The quote below, which also concerns the sexual relationship in the hypothetical scenario, illustrates this tendency.

Participant: In a sense, she is making her own decision; she is still a grown woman. She is still alive, she knew what she wanted to do. But if it was my grandmother and she had mild dementia, I would be like—no, that can't happen. What are you doing? Because I would feel like she is not all there.

Implications

- **The *Elders as Agents* model counters stereotypes of elder vulnerability.** While the model is recessive, its existence shows that the public is capable of thinking of older people as full subjects whose voices must be respected. Messages about elder abuse, perhaps inevitably, position older people at times as vulnerable victims, and, as a result, there is a real danger that campaigns around this issue will unintentionally reinforce stereotypes of older people as dependent and deteriorating and, in turn, perpetuate the sense that older people are bound to be abused and that little can be done about this. To avoid this outcome, communicators need strategies that, while acknowledging older people's vulnerability, also portray them as engaged actors. The *Elders as Agents* model provides a productive foundation on which such strategies can be built. Communications must find ways, other than discussing elder sexual abuse, to cue and reinforce this model, in order to foster more productive reasoning about older people and their role. Finding these cues will be a vital part for future prescriptive research.

The **Spotlight on Individuals** Cultural Model

When participants were asked *why* elder abuse happens, the dominant response was to place a spotlight on the *perpetrator* and *victim* and to look for characteristics of these parties that might cause abuse. Participants assumed that causes are located in and between these individual actors. When these individuals were spotlighted in people's thinking, broader situational and societal contexts faded and dropped out of view. Analysis showed clearly that when participants were focusing on victims and perpetrators, there was almost never discussion or recognition of other factors that shape these actors' behavior or otherwise contribute to elder abuse.

The assumption that causes must be located at the individual level—in characteristics of victims and perpetrators—was dominant in participants' thinking. When participants drew on the *Spotlight on Individuals* model and focused in on these individual characteristics, they consistently returned to

several specific attributes. These patterns shaped the ways that participants thought and talked about elder abuse:

1. Greed and laziness. Participants frequently traced elder abuse—neglect and financial abuse in particular—to perpetrators' *selfishness* and *lack of concern* for their victims. Financial abuse was often explained as the result of an individual's greed or need for money, and neglect was most frequently assumed to be the consequence of laziness.

> **Participant**: Caretakers who need cash—they may not be earning good livings. I think of home health aides, I'm thinking of maybe even relatives of seniors who don't have decent income-producing capacity. That comes into play. I think greed comes into play with family members who see the senior as a cash cow to be tapped into now.
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> **Participant**: Some people, they start out with good intentions and then they just for whatever reason get lazy and don't do their whole job, whether it's helping somebody change their clothes, or hygiene, or feeding them, or whatever. They just get lazy about it. Then there's probably other people who just shut the door and let them rot away while they collect their checks.
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> **Participant**: I'm a big believer that money makes the world go around. People are coin-operated. So if they can give you the minimum amount of work and get away with it, that's exactly what they'll do.

2. Lack of moral character. Less frequently than they assumed that greed and laziness cause elder abuse, participants ascribed elder abuse to a lack of moral character. Participants reasoned that elder abuse can result from an individual's moral failings, which are seen to lead to a lack of respect for older people and lack of concern for their well-being. Whereas selfishness can be situational, explanations that invoke moral character assume an individual deficit at a deeper level. Reasoning in this way, some people are assumed to be, at their core, "bad people."

> **Participant**: It's in human nature. The moral character of some people is just not there.
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> **Participant**: Some people are just horrible people. I truly don't have a better answer than that.

3. Sickos. For elder sexual abuse in particular, participants assumed that perpetrators must be "sickos" with deep mental perversions and warped motivations that are beyond genuine understanding.[9]

> **Researcher**: Why does [sexual abuse of older people] happen?

Participant: 'Cause some people are just sick.

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Participant: I just think there's sickos in the world, you know? And there always will be.

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Participant: Some type of… inexplicable, warped—the psychological construct of the perpetrator. There's something wrong with that person, something seriously wrong with the person that would require professional help.

4. Payback. Participants frequently suggested that elder abuse can involve retaliation by children against parents who abused them when they were young. Applying this understanding, participants reasoned that elder abuse sometimes involves "payback" for this prior abuse.

Participant: Payback. If a parent was abusive towards a child, and then the child becomes a caregiver, then the caregiver might feel that this is an opportunity for payback.

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Participant: Maybe it's payback, if it's a family member or a situation from a time where they couldn't retaliate.

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Participant: Some of it can be if a child mistreats their parent when they get older because they were mistreated by their parents when they were younger. Not every parent is a good parent. So a lot of times, it's revenge.

5. Older people are difficult. Informants sometimes attributed abuse to older people being difficult, either as a result of behavioral problems that accompany illness and dementia or as a result of simple grumpiness and meanness. There is a widespread assumption that older people are difficult to deal with, and abuse is sometimes described as a reaction to older people's difficult behavior.

Participant: Elderly do, some of them, have that mouth. And so they can be very forceful and mean themselves, so [others] react.

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Participant: It could be [...] the retiree/elderly person is being abusive to the nurse/aid, and they don't want to deal with it. You know, "I've been dealing with it for months, years now. That person's never nice to me."

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Participant: The people being abused I think are on the older side. The older you get, maybe the harder it is to work with or be around—a little bit grumpier. So I think the people being abused are older.

Implications

- The *Spotlight on Individuals* **model obscures the role of context in elder abuse.** By focusing attention solely on the perpetrator and victim, the model places broader societal and systemic causes of elder abuse out of view. When the model is activated, people have a hard time reasoning about how factors beyond the two individuals involved contribute to elder abuse and, in turn, why addressing broader contextual factors is necessary to solve the problem. Communicators need strategies for pivoting away from this dominant focus on the individual level in order to bring a broader set of factors and solutions into view.

- **Moralized thinking blocks issue engagement.** While condemnation of acts of elder abuse is of course reasonable, when people think of perpetrators in wholly moralized terms, it becomes difficult to move *beyond* condemnation to genuine understanding of causes and engagement with solutions. Shifting from moralization to an explanatory perspective will be necessary if people are to consider risk factors and, in turn, solutions that target those risk factors.

- **The idea that older people are difficult interferes with constructive thinking.** The public understanding of older people as mean and obstinate easily shades into blame-the-victim thinking and obscures the specific *sources* of behavioral problems. Communicators need ways to refine people's causal understanding of older people's behavior.

⌜⌝ The **Modern Life Is the Problem** *Cultural Model*

Although participants most frequently viewed elder abuse through the *Spotlight on Individuals* model, there were occasions when their thinking widened to a societal perspective, linking elder abuse to changes in society that result in challenging care situations. FrameWorks' recent research on aging found that Americans are highly attuned to how societal changes over the last several decades have strained people's ability to care for older family members.[10] The *Modern Life Is the Problem* model includes three overlapping assumptions that shape public thinking about elder abuse.

1. Modern life pushes caregivers to the limit. Participants suggested that caregivers—both professional and familial, working in both domestic and institutional locations—are under constant strain and stress. Nursing home staff are fatigued, overworked, and underpaid. Family members are often stretched to the limit, providing care while facing competing demands from their jobs and other relationships. In talking about these stresses, participants often alluded to

fundamental changes in family life and work in recent decades that have placed new and unrealistic burdens on caregivers and, in doing so, have contributed to elder abuse.

Caregivers who are stressed in these various ways are assumed to be more likely to "lash out" at older people or neglect their needs. Notably, participants assumed that the threshold for abuse is lower for nursing home staff, as family will try harder to push past fatigue and stress to provide care for loved ones.

> **Participant**: The pressures of our world nowadays; it tests people's patience for dealing with older people.
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> **Participant**: With the younger population declining, birthrates not keeping up, there will be less younger people to take care of older people. And when that happens, you're putting a greater burden on younger people. They are increasingly strapped for time as they attempt to juggle jobs, careers, spouses, significant others, children, avocations. And to me, that's a trajectory that puts elder abuse on the rise.
> **Researcher**: Why is that?
> **Participant**: Because people who will be looking after seniors will be increasingly strapped for time. I think when people are strapped for time, their best selves don't emerge. Their worst selves do.
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> **Participant**: Maybe the nurse gets overwhelmed. Or the nurse isn't happy with their job because they are getting overwhelmed. Instead of having three or four retirees, they give you maybe six or seven. They get overwhelmed.

2. Modern American culture devalues older people. At points, participants worried that in recent decades our society has come to devalue older people, and they gestured toward the idea that elder abuse stems, in part, from ageism and lack of respect for older people within the broader culture. This devaluing of older people contributes to elder abuse by reducing concern about, and, in turn, support for older people who need care. This understanding is recessive, playing a relatively modest role in people's thinking, but its appearance indicates that people are capable of thinking about how societal norms and attitudes are linked with elder abuse.

> **Participant**: Our society sucks. It's sad, it shouldn't be that way, but our culture is so—we're so focused on ourselves and so caught up in the hustle and bustle, we don't realize the value in those folks.
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> **Participant**: Years ago it was different. The older grandmothers and grandparents, they would take care of the children, or if the mother died or there was a problem they would actually

bring them up. [...] But now in these modern times you don't have that. You have two-income families that are working, and they will put the mother and the father into an old age home and let them die. No one wants to take care of them, so it's a real problem.

3. Nursing homes are an unfortunate necessity of modern life. Participants typically viewed family as the ideal caregivers for older people but noted that, in reality, nursing homes are often necessary as a result of what participants saw as key features of modern life—family dispersion and increased work demands. Although participants acknowledge that some nursing homes— particularly more expensive ones—provide high-quality care, in public thinking the prototypical nursing home is a place that is more interested in profit than the well-being of its residents, with poorly paid, poorly trained staff members that have little genuine concern for residents.

> **Participant**: Today's lifestyle, with the pressure that you have to make money, husband and wife have to work, and the older person—you know, they ship them off. They ship them off to nursing homes.
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> **Participant**: I think in traditional cultures, people don't get shipped off to nursing homes. They stay in the family home and they're cared for by family members. But our culture has put a premium on work. And people don't have time to take care of each other, because they're too busy working really hard and making as much money as they possibly can. [...] But then you have the factor of underpaid nursing home workers. Underpaid healthcare workers. [...] And if you're working in a situation where you don't feel valued, then it's easier for you to resent the people that you're there to care for. And you take it out on them.

Implications

- **The *Modern Life Is the Problem* model has mixed implications.** On one hand, when using the model, people are able to think about how societal context contributes to elder abuse. Specifically, the model focuses people in a productive way on how social conditions contribute to caregiver stress, and thus, indirectly how social conditions contribute to elder abuse. On the other hand, when people use this model they see these factors as part and parcel of modern life and, as a result, arrive at the sense that these factors are impossible to change. Communications research should be tasked with finding strategies to leverage the model's productive explanatory aspects without cuing the fatalistic underside of the model.

- **The understanding of nursing homes as an unfortunate necessity lowers expectations about quality of care and prospects for improvement.** This understanding is likely to generate pessimism about the possibility of reducing elder abuse in nursing homes and other long-term care facilities. Communicators will need strategies to raise expectations about care in long-term care facilities and to introduce alternative ways of understanding these care

contexts in order to help the public think productively about preventing and responding to elder abuse in institutional settings.

⌜⌝ The **Everyone's Responsible, No One's Responsible** *Cultural Model*

Interviews revealed a subtle but striking resistance among participants to identify any particular party as ultimately responsible for addressing elder abuse. When directly asked who is responsible, participants often answered with the vague suggestion that "everyone" is responsible.

Researcher: Who has responsibility to do something about it?
Participant: Everybody really. Everybody knows somebody who is older than them. What if that is your relative or your family that was happening to?

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Participant: Gosh, everybody. Everybody, you know, as much as they could.

When pushed to think beyond these statements and to identify specific relevant parties, participants did so but resisted ascribing full responsibility to anyone. Participants suggested that responsibility for elder abuse is dispersed between families, government, nonprofit organizations, and other parties, but they frequently circumscribed the responsibility of each party, and verbal cues indicated uncertainty and hesitation in ascribing responsibility to any one of these groups. The dispersed modeling of responsibility simultaneously makes everyone responsible and no one ultimately responsible.

Participant: You only pray that somebody would step in, intervene. I don't know who it would be, but somebody.
Researcher: Who's responsible in that situation?
Participant: People around you. Family, somebody. Hopefully someone that would notice it.

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Participant: Everyone in society has a role to play. So, the government's neglecting. Religious organizations are neglecting. Social service organizations that are not government-related are neglecting. Individual members of society probably are not coalescing around this issue to do something about it. Everyone bears the burden. Everyone has a role to play.

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Researcher: Who do you think is responsible for addressing elder abuse as an issue?
Participant: Maybe... I don't know. Civic leaders maybe. Government, local, state, federal level. Maybe... probably anybody who has the ability to spread the word. Maybe everybody's responsibility.
Researcher: So what do you mean by that?

Participant: I mean, everybody has the ability to participate in trying to help make the situation more known I guess. Provide ways if they know how to seek help about it.

This way of dividing responsibility assumes an individualistic orientation. These parties are each *personally* responsible for doing what they can to prevent and respond to elder abuse, but in the end, no one is responsible for dealing with the issue at the societal level.

Implications

- **The *Everyone's Responsible, No One's Responsible* model creates a vacuum of responsibility.** The model simultaneously undermines support for governmental solutions and reinforces fatalism. By orienting people toward *personal* responsibility, the model reinforces the assumption that individuals, not government, are the appropriate agents to solve the problem. Yet the inability to identify specific persons ultimately responsible for solving the problem undermines the idea that *anyone is capable* of solving the problem. The model is thus deeply unproductive for those interested in communicating about the crucial role of social policy in addressing elder abuse. Communicators must shift the public away from this model to successfully generate support for effective policies and interventions.

Solutions Thinking

The cultural models described generate clear patterns in people's thinking about solutions to elder abuse. Three solutions to elder abuse were dominant in public thinking, and a fourth was evident but recessive.

Solution Number 1: Surveillance and Prosecution

Participants' primary suggestion for addressing elder abuse was surveillance. The *Paternalism* and *Deterioration* cultural models led participants to insist on screening of care workers, use of technology to monitor caregivers, regular inspections of older people for injuries, and checking in on older people who live at home. Participants recommended informal oversight by friends and neighbors as well as formal oversight in nursing homes and by government agencies. Most of participants' comments about solutions were focused on *identifying* abuse. In the rare occasions where *responding* to abuse came up, the most common response suggested was prosecution, which was mentioned most frequently in sexual abuse and domestic violence cases.

Participant: These different services and agencies, you need to have a really strict and defined screening process […] and maybe technology, also, just as a prevention tool. I feel like when a person sees there's a camera right there, whether it's working or not, they're gonna act the appropriate way.

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Participant: One family member would stop by. The neighbor would stop by after they leave. Friends would stop by, coming in from work, that hadn't been there for a while. [...] Just checking and making sure everything is spotless in the house, everything was taken care of, their medication is full.

Solution Number 2: Public Awareness and Education

Participants also suggested public awareness campaigns and education as ways to prevent and stop elder abuse. They reasoned that education would increase public awareness and concern about the issue, inform older people and family members about what to do when abuse is happening, and teach people to value older people more. This solution follows from the *Spotlight on Individuals* model, which leads people to assume that solutions must convince perpetrators or victims to act differently within their existing circumstances, since individual behavior is the only factor in view.

Participant: There's reticence to report [elder abuse]. There is a lack of awareness of what it entails. People need to be educated about what it entails and what tools and resources are available to address it.

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Participant: I would probably do some kind of long-term, massive campaign trying to get folks to value the elders in their lives. Maybe give the first lady a new project or something, a "love-your-grandma" campaign or something.

Solution Number 3: Nothing Can Be Done

Another frequent response when asked to think about the possibility of solving the problem of elder abuse was *despair.* This was fueled by many of the understandings discussed above, including the idea that older people require constant care and monitoring, the perception that no one is ultimately responsible for providing that care or monitoring, and the belief that elder abuse stems from core aspects of modern life that cannot be changed. Fatalism is further reinforced by the widespread assumption of government incompetence, a familiar aspect of American culture[11] that appears frequently in public thinking about solutions to elder abuse. Together, these diverse understandings conspire to create the widespread sense that *nothing* can be done about elder abuse.

Participant: There definitely should be something we can do. I just don't know what. I mean, it would be nice if families stayed closer together again, but I mean, people move—they move away. You don't have generations of family growing up in the same house anymore. It's impossible to have that same family dynamic. [...] Yeah, that's really tough. So I don't have a good solution.

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Participant: There is only so much government, there is only so much money, there are only so many people and now government is reducing everything. I don't think anything really gets the attention it deserves, and to effect change quickly—I don't think it is possible.

Solution Number 4: Support for Caregivers

Drawing on the assumption that caregiver stress can cause elder abuse (*Modern Life Is the Problem* model), there were times when participants suggested that support for caregivers could mitigate elder abuse. While this line of thinking was decidedly recessive, it shows that people are capable of thinking about how caregiver support can reduce the burden on caregivers and prevent abuse from happening.

Participant: I wish people knew more about respite care for caregivers, so that their own frustration and anger, the situation that they're dealing with—that they have a place to go, that there's respite places for caregivers.

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Participant: I guess having additional help, not leaving one person to be in charge of this family member, having more outside help, whether it's a volunteer or paid for—it doesn't matter—any outside help is beneficial. That's probably the biggest thing.

Implications

- **The public struggles to identify constructive solutions.** People have difficulty thinking of potentially effective solutions to the problem of elder abuse. There is little awareness of many of the solutions that experts recommend, and the cultural models that people draw upon yield few productive, concrete ideas about what should be done. Crucially, the public's dominant recommendation for addressing elder abuse—surveillance—involves the mere *identification* of abuse without any subsequent ideas about what should be done to *respond to*, much less *prevent*, abuse. The public has almost nothing to say about response or prevention.

- **Solutions identified are highly individualistic.** The solutions that people are best able to reason about—surveillance and education—are deeply individualistic. Both solutions are oriented toward modifying individual behavior, rather than modifying underlying social factors that contribute to elder abuse. Communicators need strategies for helping people think beyond the individual to consider broader contextual factors.

- **The public has little understanding of institutions.** Public talk about solutions rarely mentions specific institutions. Most notably, people seem generally unaware that Adult Protective Services exist and know little about the institutions and systems that deal with aging and older people, outside of nursing homes and medical care. Increasing public understanding of institutions is crucial to help the public understand *how* elder abuse can be most effectively prevented and responded to.

- **Fatalism is a major challenge.** Because many of the cultural models that people draw upon to think about elder abuse reinforce fatalism, it is one of the biggest challenges that communicators face. In order to build support for policies and programs, people must be convinced that these measures can, in fact, make a difference.

- **The *Support for Caregivers* solution is a useful starting point.** While frequently in the background, the model's existence indicates that people *can* think productively about the links between systems and local situations. Communicators need strategies for cuing and expanding this model in order to illuminate and further explain these links.

V. Mapping the Gaps and Overlaps in Understanding

The goals of this analysis have been to: (1) document the way experts talk about and explain elder abuse in the United States; (2) establish the ways that the American public understands this same issue; and (3) compare and "map" these explanations and understandings to reveal the gaps and overlaps between the perspectives of these two groups. We now turn to this third task.

Overlaps

There are important points of overlap between expert and public understandings of elder abuse. Both experts and the public:

- Understand elder abuse as acts, or failures to act, that result in **harm to older people**. Experts and members of the public consider physical abuse, psychological or emotional abuse, neglect, and sexual abuse to be forms of elder abuse.

- Recognize that older adults are or can become **vulnerable to harm** in distinctive ways, which can render them susceptible to abuse.

- Recognize that **causes are complex and vary across situations**. Both groups understand that **dementia** among victims can make elder abuse more likely and that **caregiver stress** can contribute to abuse. Both groups recognize that a **history of conflict** between perpetrator and victim can be a contributing factor.

- View **cultural norms** as an enabling factor. While experts and the public use somewhat different language to express this point—experts talk about "ageism" while the public talks about lack of respect for the elderly—the core insight is shared.

- Recognize that elder abuse has severe physical, psychological, and financial **effects on victims**.

- View elder abuse as a clear **wrong**. While both groups recognize that blame for elder abuse can be complicated, both groups view elder abuse as something that should never happen. Once public attention is focused on the problem, members of the public express serious concern about elder abuse, just as experts do.

- View **education** as part of the solution to the problem of elder abuse.

Gaps

Analysis also revealed a number of major gaps between expert and public understandings of elder abuse.

1. **Salience: Priority Problem vs. Off the Radar.** For experts, elder abuse is a well-defined, priority concern, yet the public does not think of elder abuse as its own issue and devotes little attention or concern to it. Whereas experts see measures to address elder abuse as a vital need, the problem is not yet on the public's radar and, in turn, there is little awareness of the types of measures needed to address the issue.

2. **Self-Neglect: Included vs. Excluded.** Although there is some disagreement among experts about the scope of the term "elder abuse," many experts treat self-neglect as a form of elder abuse, and organizations that address elder abuse typically include self-neglect within their scope of concern. By contrast, the public does not think of self-neglect as a form of elder abuse, assuming that elder abuse refers only to cases in which one person abuses another.

3. **Sexual Abuse: Explainable vs. Hard to Think.** Experts treat elder sexual abuse the same way they treat other forms of elder abuse—as a phenomenon amenable to investigation and understanding. The public, on the other hand, is uncomfortable with the very idea of elder sexual abuse and has difficulty talking about it. Cultural models of aging and sexuality make it hard for people to understand elder sexual abuse and stand in the way of constructive engagement with the topic.

4. **Older Americans: Subjects to Empower vs. Objects of Care.** While experts acknowledge and highlight the vulnerability that comes with age, they understand older people as agents whose voices must be heard and respected. Experts emphasize the importance of measures to enable older people to participate in and contribute to their communities. By contrast, members of the public are deeply paternalistic toward older people, treating them as objects to be cared for rather than as full subjects. This paternalism leads to exclusive focus on measures to protect older people and quiet disregard for older people's voices and concerns.

5. **Type of Explanation: Scientific vs. Moralized.** While experts take a scientific approach toward explaining elder abuse and identify proven risk factors that are linked to it, members of the public tend toward a moralized explanation, attributing elder abuse to moral deficits in perpetrators (e.g., selfishness, lack of character) or in society broadly (a culture that lacks respect for elders). These moralized explanations constrain public understanding and make it hard for people to recognize the importance of risk factors such as mental illness, substance abuse, and lack of support.

6. **Level of Explanation: Structural vs. Individualized.** When explaining elder abuse, experts look beyond localized context to the systemic level, highlighting how formal and informal systems of support (or lack thereof) contextualize and shape the interactions of perpetrators and victims. By contrast, members of the public tend to look for causes only at the individual level, in attributes of the perpetrator, the victim, or their relationship.

7. **Increased Mortality Risk: Known vs. Unknown Effect.** While members of the public recognize that elder abuse has serious psychological, physical, and financial effects on victims, they are not familiar with the increased mortality risk, highlighted by experts, that accompanies elder abuse.

8. **Societal Effects: Salient vs. Unnoticed.** Experts emphasize that elder abuse has major financial and moral costs for society, while members of the public rarely think of societal effects. The public's tendency to understand elder abuse in localized terms, as a situation bounded by the relationship between perpetrator and victim and their immediate networks, makes it difficult to see effects at the societal level.

9. **Solutions: Systemic vs. Individualized.** The solutions that experts recommend involve leveraging institutions and systems to address the underlying causes of elder abuse and to respond effectively to abuse where it occurs. By contrast, public solutions predominantly involve individual actions (e.g., neighbors checking in on older people) and measures targeted at individual behavior change (e.g., PSAs). Not only do members of the public lack a systemic orientation, they seem largely unaware of the institutions that can help address elder abuse, including Adult Protective Services, government agencies that focus on aging, and community-level organizations that provide services to older people.

10. **Locus of Responsibility: Collective vs. Everyone/No One.** At a superficial level, experts and members of the public agree that we are all responsible for addressing elder abuse. But beneath this seemingly common sentiment are profoundly different conceptions of what this means. For experts, common responsibility means the American people are collectively responsible, via shared public institutions, for preventing and responding to elder abuse. For members of the public, common responsibility means that "everyone" is individually responsible for doing what he or she can to address elder abuse, but that no one is truly responsible for dealing with the issue at the societal level.

11. **Orientation: Forward vs. Backward.** Experts focus on the future, highlighting the importance of new research and innovative strategies to address elder abuse. The public, by contrast, sees elder abuse through the lens of the past, viewing it as a consequence of changes in modern life that are not amenable to change. The forward-looking orientation of experts is hopeful, while the public's backward-looking orientation leads to pessimism.

12. **The Problem: Solvable vs. Unsolvable.** While experts identify a range of strategies to prevent and respond to elder abuse and highlight the possibility of identifying even more effective interventions through further research, members of the public are fatalistic about elder abuse. This fatalism is supported by a wide range of cultural models, including models of modern life, the default to individualized solutions that do not suffice to address the issue effectively, and models of aging and older people that figure elder abuse as another symptom of inevitable deterioration and decline.

VI. Conclusion

As advocates and experts work to move elder abuse up on the public agenda and to increase public understanding about and support for addressing the issue, they must navigate a complex cultural landscape that includes both productive pathways and pitfalls. The research presented in this report shows that the public does not need to be convinced that elder abuse is wrong or that it warrants concern. Once the issue is brought to public attention, members of the public can quickly identify most major forms of elder abuse and recognize the severe physical, financial, and psychological effects that abuse has on victims. These understandings offer a productive starting point for communicating about elder abuse. However, this research has also identified patterns in public thinking that, if not taken into account, will consistently undermine the effectiveness of advocates' and experts' messages.

Advocates and experts need tools and strategies that will allow them to skillfully navigate the cultural landscape around the issue of elder abuse, leveraging and building upon productive understandings while circumventing problematic ones. Doing this will require the development and testing of tools and strategies to accomplish the following tasks, which comprise a prospective "to-do" list for future research:
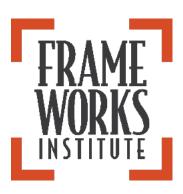
1. **Cultivate thinking about older people as subjects.** Displacing the model of elder abuse victims as deteriorating objects of care is a precondition for generating support for the kinds of programs that help prevent elder abuse, especially those programs that work by fostering active participation by older people within their communities. More broadly, helping people see elders as subjects is vital to combatting ageism within American culture. Because the topic of elder abuse strongly triggers cultural models of older people as deteriorating and dependent, messaging about elder abuse that fails to provide alternative representations of older people *as subjects* is likely to reinforce negative stereotypes of older people and further entrench the problems created by this perception. Cultivating models of older people as subjects is thus crucial not only for shifting public thinking around elder abuse but also for promoting productive thinking about aging more generally.

2. **Generate understanding of systems and institutions.** Communicators need ways to improve understanding of the systemic factors that contribute to elder abuse and of the institutional responses that can help to address the problem. Absent these understandings, the American public will default to a localized, moralized understanding of causes and to individualized solutions to the problem. Communicators must help people to understand policies and programs more concretely and to see how these measures would help to address elder abuse.

3. **Promote a collective, public orientation towards solutions.** The public's localized understanding of effects and individualistic understanding of responsibility lead people to assume that little can or should be done about elder abuse beyond education and surveillance—strategies aimed at behavior at the individual level. Communication strategies need to be developed to help the public see societal effects and adopt a collective understanding of responsibility, to help the public understand elder abuse as a societal problem that can and must be tackled through

collective action at the systemic level. Generating support for needed funding and policy measures requires helping people identify with others as fellow citizens capable of acting in concert through public institutions.

4. **Put self-neglect on the map.** Members of the public do not think of self-neglect as a form of elder abuse. Messaging could try to shift public understandings to include self-neglect within the concept of elder abuse, or strategies could be developed to communicate about self-neglect under its own heading, as a distinct but related issue. An effective strategy for communicating about self-neglect is vital to prevent this issue from falling out of public consideration.

5. **Boost the public's sense of efficacy.** Communicators need strategies to combat the fatalism that results from many of the public's default cultural models. Fatalism undermines support for necessary policies. After all, why support a policy if it will not make a difference? Boosting the public's sense of efficacy—their sense that collective actions *can* make a difference—is thus vital to increase support for the policies and programs that experts recommend.

Accomplishing these tasks will require communications tools of varying types. *Values* are likely needed to promote a collective orientation and to boost efficacy. Explanatory tools such as *Explanatory Metaphors, explanatory chains,* and *examples* are needed to generate better understanding of systems and institutions. Shifting public perceptions of older people is an especially challenging task that likely calls for a range of tools, including perhaps *exemplars*, as well as thematic *narratives* that include a place for older Americans as central actors within the story.

About the FrameWorks Institute

The FrameWorks Institute is an independent nonprofit organization founded in 1999 to advance science-based communications research and practice. The Institute conducts original, multi-method research to identify the communications strategies that will advance public understanding of social problems and improve public support for remedial policies. The Institute's work also includes teaching the nonprofit sector how to apply these science-based communications strategies in their work for social change. The Institute publishes its research and recommendations, as well as toolkits and other products for the nonprofit sector, at www.frameworksinstitute.org.

Please follow standard APA rules for citation, with FrameWorks Institute as publisher.

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Endnotes

[1] Simon, A., O'Neil, M., & Haydon, A. (2015). *Aging, agency, and attribution of responsibility: Shifting public discourse about older adults.* Washington, DC: FrameWorks Institute.

[2] See Lindland, E., Fond, M., Haydon, A., & Kendall-Taylor, N. (2015). *Gauging aging: Mapping the gaps between expert and public understandings of aging in America.* Washington, DC: FrameWorks Institute.

[3] On cultural models, see Quinn, N., & Holland, D. (1987). Culture and cognition. In D. Holland & N. Quinn (Eds.). *Cultural models in language and thought* (pp. 3-40). Cambridge: Cambridge University Press.

[4] See Quinn, N. (Ed.). (2005). *Finding culture in talk: A collection of methods.* New York, NY: Palgrave Macmillan.

[5] For more on these models, see Lindland, E., Fond, M., Haydon, A., & Kendall-Taylor, N. (2015). *Gauging aging: Mapping the gaps between expert and public understandings of aging in America.* Washington, DC: FrameWorks Institute; Lindland, E., Volmert, A., Haydon, A., & Ford, A. (2014). *"Everyone's young or old…": Mapping the gaps between expert and public understandings of demographic change in the U.S.* Washington, DC: FrameWorks Institute.

[6] On toxic combos, see FrameWorks Institute. (2012). *Early childhood development meets budgets and taxes, featuring SWAMPED!* FrameWorks Institute: Washington, DC.

[7] Lindland, E., Fond, M., Haydon, A., & Kendall-Taylor, N. (2015). *Gauging aging: Mapping the gaps between expert and public understandings of aging in America.* Washington, DC: FrameWorks Institute.

[8] On sexual abuse and consent, cf. Volmert, A., Fond, M., & O'Neil, M. (2015). *"It's hard to wrap your head around": Mapping the gaps between expert and public understandings of child maltreatment and child sexual abuse in Alberta.* Washington, DC: FrameWorks Institute.

[9] FrameWorks found a similar model in public thinking about child sexual abuse in the United Kingdom and in Alberta. See Lindland, E., & Kendall-Taylor, N. (2013). *"No idea how that works or what you would do about it …": Mapping the gaps between expert and public understandings of child maltreatment.* Washington, DC: FrameWorks Institute; Volmert, A., Fond, M., & O'Neil, M. (2015). *"It's hard to wrap your head around": Mapping the gaps between expert and public understandings of child maltreatment and child sexual abuse in Alberta.* Washington, DC: FrameWorks Institute.

[10] Lindland, E., Fond, M., Haydon, A., & Kendall-Taylor, N. (2015). *Gauging aging: Mapping the gaps between expert and public understandings of aging in America.* Washington, DC: FrameWorks Institute.

[11] See Bales, S. N. (2006). *How to talk about government: A FrameWorks Message Memo.* Washington, DC: FrameWorks Institute.