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CULTURAL SENSITIVITY AND ELDER ABUSE: CONSIDERATIONS FOR SOCIAL WORK PRACTICE

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CULTURAL SENSITIVITY AND ELDER ABUSE:
CONSIDERATIONS FOR SOCIAL WORK PRACTICE

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Katherine Rellosa Bernardo

June 2014

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ABSTRACT

The purpose of this study was to explore how social workers identify elder abuse, factors they find contribute to or protect from elder abuse, and cultural considerations they identify as important. The qualitative research approach was utilized, and an interview instrument was created to explore participants' perceptions and generate recommendations for developing cultural sensitivity in practice. The study sample consisted of 10 social workers with experience working with the elderly population recruited by snowball sampling. Face-to-face interviews were conducted, audio-recorded, and transcribed for analysis. This study found that social workers are particularly knowledgeable about risk factors for elder abuse and cultural considerations, such as client perception of seeking help and accepting services as taboo, and the greater effectiveness of a social worker who shares the same cultural background. A key finding was social workers' perceived need for education in developing cultural sensitivity, including formal trainings, consultation with client families, and self-awareness. Implications for social work practice include the development of new and more comprehensive training programs, such that specifically incorporates cultural sensitivity. Greater opportunities for education call for increased funding, and mandatory cultural sensitivity trainings call for changes in policy. Future research is needed to understand client perceptions of elder abuse and of service providers. Finally, future research on elder abuse and cultural factors beyond race and ethnicity, such as sexual orientation and religion, is also needed.

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Thank you to my family and friends for supporting me – listening to me, feeding me, making me laugh, making me coffee. I only made it this far with your love and support. A special thank you to Mike, my best friend and my rock. Thank you for taking on my struggles, celebrating my wins, and believing in me the whole way through. I love you.

DEDICATION

This project is dedicated to my grandmother, Melitona. You have lived a life full of love and laughter, and you continue to make me smile every day. You inspire me to be kinder, braver, and better. You deserve the world... but I hope you'll take this project. Maraming salamat po sa lahat ng ibinigay mo sa akin.

Mahal na mahal kita.

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CHAPTER ONE

INTRODUCTION

This chapter will discuss the problem of elder abuse, particularly the need for culturally sensitive interventions and considerations in identifying, preventing and addressing elder abuse. The purpose of the present study and its significance to social work will also be discussed.

Problem Statement

According to the Administration on Aging (2013), elderly persons, those age 65 years or older, numbered 39.6 million in 2009, constituting 12.9% of the U.S. population. They are projected to reach 72.1 million by 2030, 20% of the U.S. population. The greatest increase will be among those age 75 years and older, a group that experiences increased frailty and decreased ability to perform the basic activities of daily living. By 2030, this group is estimated to increase to 9.2% of the population (AOA, 2013). Older adults are the most vulnerable to physical, mental and financial crises, often requiring the care of their families and the community. This population requires more care and protection than is currently available or possible, including social services at both the micro and macro levels.

As the aging population continues to grow disproportionately to available services and caregivers, compounded with physical, mental and financial vulnerabilities, the risk for elder abuse increases (Pillemer, 1990). Elder abuse is

a rapidly growing problem in the U.S. Once a hidden and taboo issue, elder abuse has continued to gain attention as the baby boom generation grays and more people are living longer than ever before. A pervasive concern with devastating effects, elder abuse is associated with decreased quality of life and increased morbidity and mortality rates, as well as physical pain and mental anguish (Abolfathi Momtaz, Hamid, & Ibrahim, 2013).

In order to identify, prevent and address elder abuse, there needs to be a consistent and uniform definition across states and agencies; this has not been the case. However, though definitions vary, they generally describe harm or loss to an older victim. Anetzberger (2012) provides a comprehensive and updated taxonomy of elder abuse which reflects current understanding of the problem. Elder abuse can be perpetrated by the victim, a trusted other, a stranger, or an acquaintance; can occur in domestic or institutional settings; takes the form of abuse or neglect (either of which can be intentionally or unintentionally motivated); and can be physical, psychological, social, financial, or sexual in nature. Anetzberger's (2012) definition will be used throughout the present study.

Such an inclusive definition of elder abuse, in addition to the discrepancy in definitions across the U.S., leads to a wide range of prevalence estimates. The following statistics represent the average findings. In 2000, the total number of elder/adult abuse reports received nationally was 472,813 (National Center on Elder Abuse, 2003). The National Elder Mistreatment Study, funded by the National Institute of Justice, found that 11% of elders reported experiencing at

least one form of mistreatment in the past year, including emotional mistreatment (5.1%), physical abuse (1.6%), sexual abuse (0.6%), financial exploitation (5.2%) and potential neglect (5.1%). Of those who reported physical abuse, 31% had reported to the police, and family members were the perpetrators in 76% of the cases. Of those who reported sexual abuse, 16% had reported to the police, and family members were responsible for about half of the cases (Acierno, Hernandez-Tejada, Muzzy, & Steve, 2009).

The lack of a uniform definition, in addition to the fact that elder abuse is a socially constructed term, makes finding appropriate interventions difficult. In fact, Ploeg, Fear, Hutchison, MacMillan and Bolan (2009) found in their systematic review of elder abuse interventions insufficient evidence for any particular intervention.

According to Simpson (2005), elder abuse is a multifaceted problem that affects elderly persons from different backgrounds and involves a wide variety of risk and protective factors. Cultural factors such as language, attitudes toward illness, values, expectations and perceived roles may keep elderly persons and their caregivers from understanding society's concept of elder abuse, let alone to seek assistance or report abuse. For the minority elder, social, economic and environmental factors leave them particularly vulnerable to acute and prolonged psychological and emotional distress (Simpson, 2005). Furthermore, researchers have relied on the validity and reliability of instruments that have been standardized on white, non-minority, middle class samples that fail to consider

the unique cultural characteristics and attitudes of diverse populations (Abolfathi Momtaz et al., 2013). Thus, successful interventions for identifying, preventing and addressing elder abuse must also be able to be utilized in a culturally sensitive manner, given that various cultural groups have a unique perception and experience of elder abuse.

Purpose of the Study

The purpose of the present study is to explore how social workers identify elder abuse, factors that they find contribute to or protect from elder abuse, what cultural considerations they make and what culturally sensitive interventions they have successfully utilized and/or seen in their experience in working with this population. This study explores the problem of elder abuse from the perspective of social workers who work directly with the elderly population in agencies such as hospice, skilled nursing facilities and elder care centers. These social workers were chosen as the informants of the present study because they work with the elderly population in a capacity that is both intimate and comprehensive, as they serve the elderly clients as well as their caregivers and/or family and treatment teams. Although elder abuse cases and considerations identified by social workers employed in these settings may not be representative of all elder abuse cases, it is hoped that by examining their case experiences, some degree of the scope and the nature of elder abuse will be understood, and guidelines for culturally sensitive practice will be offered. This study in no way intends to examine actual prevalence or incidence of elder abuse, nor absolute best

practices. The primary focus of the present study is exploring the expertise of social workers in identifying, preventing and addressing elder abuse in a culturally sensitive manner – what works in the field.

Although elder abuse is not a new phenomenon, much research is still needed to refine and improve intervention. By exploring social workers' perspectives and experiences in working with the vulnerable elderly population, including minority groups that may have been overlooked in the literature due to small sample sizes or other limitations, the present study hopes to provide social service providers and professionals with guidelines to address elder abuse in a culturally sensitive manner. By investigating social workers' perceptions, experiences of and responses to elder abuse, the present study attempts to contribute to the recognition of elder abuse as a problem and to promote the development of effective intervention and prevention strategies.

The present study used qualitative research methods, chosen in order to gather as much unique information from the expertise of social workers as possible. Through interviews, the researcher generated themes that indicated common and successful culturally sensitive considerations, as well as uncovered areas for further exploration and research.

Significance of the Project for Social Work

The present study is relevant to social work, firstly, due to the increasing numbers of elderly clients who will require care, protection and social services. Research that can guide policy, practice and future research for this vulnerable

population is valuable and needed. Organizations at both the micro and macro levels, such as The Administration on Aging, The Gerontological Society of America, Adult and Aging Services and Adult Protective Services, may benefit from increased knowledge regarding implementation and provision of necessary services directly related to the elderly. Findings from the present study aim to provide insight into the cultural considerations that professionals in the field find to be successful, as well as determine areas for improvement, such as the need for cultural competence training.

CHAPTER TWO

LITERATURE REVIEW

Introduction

This chapter will present a more thorough examination of elder abuse, including a brief history of the problem, the evolution of definitions, most recent prevalence estimates, risk factors and characteristics of the victims and the perpetrators, consequences, cultural factors and interventions. Particular attention will be paid to how cultural and demographic factors shape the problem of elder abuse and how social workers can be more culturally sensitive in practice. Finally, a theoretical framework will be presented.

History

The earliest study of Adult Protective Services, conducted for the National Council on the Aging in 1960, sparked national conferences and demonstrations on the subject (Hall & Mathiasen, 1963). Through the 1970s and 1980s, the focus shifted from Adult Protective Services to elder abuse, a concept that evolved from research on family violence (Giordano & Giordano, 1984). At this time, with little existing research, social workers had to rely on practice knowledge to guide social services. Through the 1980s social work increased its interest in and services to the elderly, especially in nutrition, transportation, and rights (Cormican, 1980). The most comprehensive approach was thought to include coordinating the efforts of the various disciplines to provide essential

services including health, legal, financial and emergency services when necessary. However, because of budget cuts and the trend toward reduced services, a greater number of adult children were caring directly for their elderly parents, which increased the circumstances under which elder abuse most commonly occurred (Giordano & Giordano, 1984).

The passage of Title XX of the Social Security Act in 1974 allowed states to use Social Services Block Grant (SSBG) funds for the protection of adults (Mixson, 1995). In 1984 only 17 states had mandatory reporting laws for elder abuse and, by 1991, 42 states had mandatory reporting laws (National Adult Protective Services Association, 2013). Having these laws in place and continually refining the definition of elder abuse allows social service professionals to better identify, prevent and address elder abuse.

Definition

A consistent theme in elder abuse literature is the lack of consensus in the definition and classification of elder abuse (Anetzberger, 2012; Mercurio & Nyborn, 2006). In part, the lack of a uniform definition is due to the complexity in operationalizing the type, scope and nature of various forms of abuse. The definition will determine who will be considered to be abused or not, what legislation does and does not cover, and who is and is not eligible for services. The definition will also determine the type of interventions offered and, ultimately, the effectiveness of the interventions in addressing the abuse. Thus, an accurate definition of elder abuse is imperative for practice and continued research.

Anetzberger (2012) cites some reasons for the lack of a generally accepted definition of elder abuse. First, in the early years of recognizing elder abuse, there was no ultimate entity to enforce the use of common definitions. Thus, none were developed and too many years have passed now to supplant the existing definitions used in state reporting laws and by Adult Protective Services. Also, some definitions may never receive traction because they either include, some may feel, too much (e.g., self-neglect) or not enough (e.g., the able-bodied elderly; Anetzberger, 2012).

Our understanding of elder abuse does, however, continue to grow and evolve because of continued research due, in part, to increased funding and a growing number of scholars interested in the problem. Anetzberger's (2012) taxonomy of elder abuse, which will be applied throughout the present study, represents an updated and comprehensive definition which reflects most of the existing definitions in the literature.

Elder abuse has generally come to include physical, sexual, psychological and financial abuse as well as neglect. These categories, however, are not consistently defined nor applied across studies. For example, Pillemer (1990) notes that "withholding of personal care" may be classified as physical abuse, active neglect or psychological neglect. This lack of uniformity in the application of the categories makes it difficult to compare research findings. In addition, research suggests that there are differences in the perceived seriousness of various forms of elder abuse by ethnicity within a country and across countries

(Chang & Moon, 1997; Mercurio & Nyborn, 2006; Pablo & Braun, 1997; Tauriac & Scruggs, 2006).

Prevalence

The scope of elder abuse has been a subject of interest and speculation since the problem was recognized. Inconsistent elder abuse definitions, underreporting due to shame or fear of retaliation, and lack of a universal assessment tool are just a few factors that contribute to the wide range of elder abuse prevalence estimates in the literature. Recent research shows that elder abuse may be twice as common as previously thought (Anetzberger, 2012).

Laumann, Leitsch and Waite (2008) found that 9% of community-dwelling elders reported verbal mistreatment; 3.5%, financial mistreatment; and 0.2%, physical mistreatment. Data analysis also revealed more verbal mistreatment for women and those with physical disabilities, and more financial mistreatment for African Americans and those without a spouse or intimate partner.

The National Elder Mistreatment Study revealed past-year prevalence of emotional mistreatment to be 4.6%; physical mistreatment, 1.6%; sexual mistreatment, 0.6%; current potential neglect, 5.1%; current financial exploitation by family, 5.2%; and lifetime financial exploitation by a stranger, 6.5%. Excluding financial exploitation, about one in ten respondents reported at least one form of past-year mistreatment and 1.2% reported two or more forms. Data analysis further indicates that spouses or intimate partners were more likely than adult children to perpetrate most forms of elder abuse (Acierno et al., 2010).

Two studies discuss elder abuse in various care settings. Page, Conner, Prokhorov, Fang and Post (2009) found that care setting had an impact on the type and rate of elder abuse, particularly high rates across all types of abuse in nursing homes, high rates of verbal abuse in paid home care, and high rates of neglect in assisted living situations. Schiamburg et al. (2012) found that elders in nursing homes experienced physical abuse by staff at least once, including restraint and sexual abuse.

Risk Factors

Research has explored risk factors for elder abuse, including victim, perpetrator or situation attributes which may contribute to the incidence of elder abuse (Barker, 2000). The National Elder Mistreatment Study found varying risk factors for different types of elder abuse, particularly that elders with physical disabilities were at higher risk for financial abuse, while elders with low income and poor health were more likely to experience neglect (Acierno et al., 2009). The study also found that unemployment, mental illness, and substance abuse were risk factors for caregivers, making them more likely to perpetrate elder abuse (Acierno et al., 2009).

Significant risk factors from early literature continue to receive support from research, such as

lack of social support for the victim; social isolation of the victim, perpetrator or both; perpetrator substance abuse or other pathology; poor behavior (e.g., aggression, socially inappropriate actions) on the part of

the victim as perceived by the caregiving perpetrator; and poor or declining health or functional capacity for the victim. (Anetzberger, 2012, p. 17)

Barker (2000) examined factors that predicted service use for elder abuse victims. The resulting profile of the elder abuse victim was a white female, age 75 years, widowed or single, with cognitive and/or activities of daily living (ADL) impairments, and low income. The abuser profile was a male offspring, age 50 years, living with and financially dependent on the elderly victim, with mental illness and/or substance abuse problems (Barker, 2000).

Consequences

Research on the consequences of elder abuse has focused on mortality, economic loss, and emotional, psychological and behavioral impact. Dong et al. (2009) found that mistreated elders had a higher mortality rate than non-mistreated elders. Baker (2009) similarly found that elderly women who experienced physical and verbal abuse were at a higher risk for mortality than elderly women who did not.

In regards to elder financial abuse, The MetLife Mature Market Institute, in collaboration with the National Committee for the Prevention of Elder Abuse and the Center for Gerontology at Virginia Tech, found that annual losses to victims calculated at \$2.6 billion in 2008, increasing 12 percent to \$2.9 billion in 2012 (as cited in Anetzberger, 2012, p. 18).

Rovi, Chen, Vega, Johnson, and Mouton (2009) found that abused elders were three to four times more likely to be discharged to a nursing home or other facility than to homecare or self-care, suggesting that institutionalization may also be an outcome of elder abuse.

Cultural Factors

Little is known about the abuse of elders in minority populations, though the research is increasingly focusing on risk and prevalence factors in particular populations. Anisko (2009), for example, studied elder abuse in American Indian communities. Not only is this population rapidly growing, but they also experience a higher prevalence of chronic diseases such as obesity, diabetes, and cardiovascular disease than white elders.

A common theme throughout various American Indian tribes in the U.S. is that they are of a culture that reveres the elderly in their communities (Anisko, 2009; Smyer & Clark, 2011). Elders are the carriers of the culture, holders of wisdom, and strength of the community. They assist in raising children, teach languages, customs, and ceremonies, and often comprise leadership groups of spiritual leaders, healers and council chairs. Elder status is often based on life experience, wisdom, and respect from the community (Anisko, 2009). Research suggests that 10 percent of American Indian elders suffer from definite or probable physical mistreatment (Anisko, 2009). This percentage does not include other types of abuse such as psychological abuse, financial abuse or neglect, and it is therefore likely to be an underestimate of overall elder abuse. Factors

that have been found to contribute to elder abuse in this population are caregiver substance use and psychological illness, marital conflict/domestic violence, financial dependence of the caregiver on the elder, poverty, multiple caregivers, and medication noncompliance. Furthermore, because mistreatment of an elder is contrary to the cultural role expectations, it may often go unreported out of shame and guilt (Anisko, 2009).

Arai (2006) examined elder abuse in Japanese culture. Confucian principles of filial piety, which emphasize providing for aged parents, have a long tradition in Japanese culture. The younger generation, however, adheres less to it than the older generation. Surveys indicate that the incidence of physical abuse and neglect were highest in home settings. It is difficult, however, to obtain a true prevalence due to the fact that it is important in Japanese culture to keep family matters private. Researchers note that the Japanese are tolerant of family violence and that abusers tend to be under a high level of stress (Arai, 2006).

As support for traditional Japanese values and norms are shifting towards industrialization and urbanization, Japanese elderly are no longer guaranteed the same prestige, power and care within the family. These shifts are likely to have affected perceptions of elder abuse in Japanese culture. Arai (2006) found that Japanese tend to consider physical aggression and neglect as elder abuse, suggesting stress caused by conflicting expectations among Japanese families. They also consider “not taking care of elderly parents” as extreme elder abuse, reflecting filial responsibility (Arai, 2006).

Chang and Moon (1997) examined elder abuse from the perspective of Korean American elderly. Because most refused to disclose their own experiences of mistreatment due to strong cultural norms of shame, face-saving and keeping family problems within the family, the study focused on how Korean American elders identify and define elder abuse. Findings suggest that financial and psychological abuse occur more frequently than physical abuse and neglect in this population, with sons typically as financial abuse perpetrators and daughters-in-law as responsible for psychological abuse. These findings are consistent with the concept of filial piety, which also has a strong influence in Korean culture. Filial piety dictates that the oldest son live with his parents and that his wife perform the household duties. Korean elderly parents tend to be much more critical of daughters-in-law because of their inferior status in the family. The finding that daughters-in-law were named as perpetrators more frequently than any other family members may be due perceived deviation from traditional expectations (Chang & Moon, 1997).

Hudson and Beasley (1999) examined elder abuse and elder neglect from the perspective of African Americans from four different counties and regions of North Carolina and found that perceptions on what constituted elder abuse varied.

Interventions

Given the increasing number of older adults likely to experience abuse and its associated negative impacts, it is particularly important to develop and

implement effective prevention and management interventions. Literature on elder abuse presents a plethora of interventions, the majority of which is descriptive and non-experimental. Ploeg et al. (2009) conducted a systematic and critical review in response to the dearth of high-quality primary studies on elder abuse interventions. The researchers found, unfortunately, that the literature offers insufficient evidence to support any particular elder abuse intervention. Intervention groups receiving education and home visits had higher rates of elder abuse recurrence than did the limited or no intervention control groups. A comparison of different interventions (psychoeducational support group, case management, legal interventions, social services) found no statistically significant differences between groups on case resolution. One study examined the impact of a training for at-risk caregivers and found no difference between intervention and control groups (Ploeg et al., 2009). The researchers' findings, or lack thereof, underscore the importance of more rigorous evaluation, as well as new and innovative approaches.

Project CARE evaluated the acceptance and success of intervention strategies in cases of elder abuse and neglect, "success" defined as stopping or reducing abuse and/or neglect or solving identified problem, such as isolation (Nahmiash & Reis, 2000). The researchers found that the second most accepted and successful strategies, following medical strategies, were those that address the abuser or potential abuser (in this study, the caregiver) such as caregiver education, respite care, family counseling and providing resources. Barker (2000)

found that the three best practice models for addressing the most common barriers to service utilization for elder abuse include a multidisciplinary conference team, a volunteer advocacy program, and a victim support group. These findings are particularly relevant to social work practice and support a social-ecological perspective of elder abuse.

Theories Guiding Conceptualization

Theories help researchers explain how and why things occur, and form the basis for interventions. A variety of theories have been applied to or developed to explain elder abuse. Research suggests that no single theory can comprehensively explain all causes of elder abuse (Abolfathi Momtaz et al., 2013; Biggs & Goergen, 2010). The following theories were chosen to guide the present study for their application to culturally sensitive elder abuse interventions.

Symbolic interactionism holds that people “view the world through their interactions with others” (Abolfathi Momtaz et al., 2013, p. 184). Perception and interpretation are, thus, not always same for all people. Applied to elder abuse, this theory illustrates the role that culture plays in the perception and definition of abuse. For example, some cultures may consider sending elders to nursing homes as a form of abuse, whereas other cultures see it as a caring act (Abolfathi Momtaz et al., 2013). For the purpose of the present study, symbolic interactionism will frame the researcher’s understanding of elder abuse as a phenomenon heavily influenced by the victim’s, perpetrator’s and, perhaps, social worker’s culture. Social interactionism serves to explain not only why elder

abuse occurs, but why elder abuse is perceived and found to have different prevalence rates and risk factors in different cultures.

Summary

This chapter explored the problem of elder abuse, particularly how cultural factors can interplay with other known risk and protective factors for elder abuse. The literature reviewed in this chapter represents some of the most current knowledge on the topic, as well as areas that need further exploration. As noted, researchers are increasingly becoming interested in how different cultures perceive and understand elder abuse. With the dearth of information for every single culture of the elderly clients needing social services, it is the worker's responsibility to be prepared and be culturally sensitive in practice. The present study aims to gain the professional perspective of social workers to understand what culturally sensitive interventions are appropriate and successful.

CHAPTER THREE

METHODS

Introduction

This chapter will outline how the present study design was developed, the purpose of the research project and the limitations of the study. The development of the interview instrument and the ways in which participants were selected and data were collected will be explained.

Study Design

The purpose of the present study is to explore culturally sensitive elder abuse interventions from the perspective of social workers. By examining the case experience and perceptions of social workers, this study aims to gain a better understanding of elder abuse, particularly cultural considerations and successful culturally sensitive interventions. The qualitative research approach was utilized and is well-suited for the present study's purpose. The researcher developed an interview instrument which aimed to explore the participants' subjective realities and perceptions, allowed for elaboration, and suggested themes for further inquiry and research.

One limitation of the present study is that the social workers had varied and sometimes limited case experience with clients of a different and/or minority cultural group, thus affecting the amount and depth of the data collected. The snowball sampling method as well as the small sample size itself, at 10

participants, was a limitation as the sample cannot be confidently representative of the population. Finally, the sensitive subject of elder abuse may have affected the amount and type of information that participants were willing to disclose and discuss.

The research questions asked in the present study included: (1) What considerations are made by social workers in working with elderly clients of a minority cultural group? (2) How do cultural factors affect the identification, prevention and intervention of elder abuse, as perceived by social workers?

Sampling

The present study utilized a sample of 10 licensed social workers working in agencies serving the elderly population in San Bernardino County. The participants were recruited by snowball sampling, which allowed the researcher to involve only the particular population (i.e., licensed social workers) which is knowledgeable about the topic being studied, willing to talk, and representative of the range of points of view (Grinnell & Unrau, 2011). By using a snowball sampling method, the researcher was able to interview social workers from a variety of agencies and settings. The participants needed to meet two criteria: 1) participants must be licensed social workers and 2) respondents must work in a capacity directly with elderly clients. The reason for reaching out to social workers was that they work both directly with elderly clients as well as with their families, caregivers, and within a multidisciplinary team. This comprehensive

approach to treating clients provides a context for a social-ecological approach to identification, prevention and intervention.

Data Collection and Instruments

Data was collected through face-to-face interviews conducted by the researcher. Although face-to-face interviews have the possible limitation of being more time-consuming and costly, compared to telephone interviews or questionnaire surveys, advantages include allowing the researcher to establish the rapport that is necessary for interviewing respondents about sensitive issues such as elder abuse. Face-to-face interviews also allow interviewers to explore the respondents' experiences and perceptions, beyond predetermined categories and themes. Moreover, they allow for the clarification of participants' responses.

Data collection was conducted from January 2014 to March 2014. A standardized interview guide was developed and used by the researcher for all interviews to ensure consistency in data collection and to minimize interviewer bias (see Appendix A). The interview guide was adapted in part from instruments used by Kim's research on elder abuse (Kim, 2003). Modifications and additional questions were developed to fit the particular purpose of the study, namely to examine and identify culturally sensitive practices in addressing elder abuse. To ensure reliability and validity of the interview instrument, the researcher consulted with a faculty research advisor as well as other faculty members and graduate social work students. The resulting interview guide was determined to be linguistically, conceptually and culturally appropriate.

Procedures

Agencies providing care and services to elderly persons in San Bernardino County were identified. The researcher initially contacted three social workers by phone, requesting an opportunity for an interview as well as contact information of possible additional participants. The researcher explained the purpose and procedures of the study and the nature and importance of involvement of the social workers. The researcher reached out to contacts provided by the initial participants to explain the study and request their participation. Upon agreement to participate, the researcher scheduled interview dates, times and locations. Interviews were conducted at a convenient location, generally near the participants' work.

At the beginning of the interview, each participant was provided with detailed information on the purpose and procedures of the study in writing and verbally. Each participant was given the informed consent form to review and sign with an X, including consent for audio recording. The informed consent was explained to each participant in detail. Complete anonymity of the participant was emphasized. The participant was also assured that he or she had no obligation to participate and may withdraw from the study at any time without repercussions, particularly any effect on his or her job. After the informed consent was completed, the participant was given a brief demographics questionnaire to complete, then the interview began.

The researcher asked each question as outlined on the interview guide, providing prompts as needed. Each interview took approximately 15-30 minutes to complete. After the interviews were completed, the researcher allowed participants to ask any questions or voice any concerns. A debriefing statement was given to each participant, including the name and contact information of the researcher's faculty research advisor and a reminder that research findings will be available in the California State University San Bernardino library in the summer. A \$5.00 Starbucks gift card was also given to each participant for their participation.

Protection of Human Subjects

The researcher completed Human Subjects Ethics Training in the Protection of Human Participants prior to beginning the research project and conducting interviews. The anonymity of the participants is protected as no names or other identifying information were collected and participants were instructed not to reveal any identifying information during the interview. Participants completed an informed consent prior to providing any information and were given a debriefing statement upon completion.

Data Analysis

Audio recordings of the interviews were transcribed by the researcher then scanned manually for pervasive themes and patterns that captured the participants' experiences. These "meaning units" were sorted into categories and

codes were assigned to the categories (Grinnel & Unrau, 2011). The codes and notes were then analyzed to examine elder abuse and cultural factors.

Summary

This chapter outlined the methods and procedures for conducting the present research study. Study design, sampling and participants, data collection, the interview instrument, procedures and data analysis were described, and the protection of human subjects was discussed and emphasized.

CHAPTER FOUR

RESULTS

Introduction

This chapter presents the findings of the study in the form of short narratives which give further description of the following categories: risk factors for elder abuse, cultural considerations, and developing cultural sensitivity. Also included in this chapter is a description of participant demographics.

Demographics

The sample comprised 10 social workers who have experience working with the elderly population. The majority of participants, 7, were licensed clinical social workers, while the remaining 3 participants were non-licensed social workers. Of the 10 participants, 8 were female and 2 were male. The age range of the sample was 27 to 64 years, with a mean of 42 years. The participants' years of experience working with the elderly population ranged from 1 to 40 years, with a mean of about 11 years (11.5). The majority of participants, 7, identified as white, 2 identified as Black or African American, and 1 identified as Hispanic. The majority of participants were white, female, licensed clinical social workers.

Findings

Interview questions were roughly developed around three themes, through which the data was organized and analyzed: (1) risk factors for elder abuse,

including characteristics of the victim, perpetrator or situation that are closely linked to the occurrence of elder abuse; (2) cultural considerations, including race and ethnicity, socioeconomic status, and cultural values; and (3) developing cultural sensitivity, including recommendations for social work practice made by participants. Responses will be presented and discussed within these three categories.

Risk Factors for Elder Abuse

The first group of interview questions explored social workers' perceptions and understanding of risk factors for elder abuse. These questions were: (1) In your opinion, what constitutes elder abuse?, (2) What factors contribute to elder abuse?, (3) What characteristics of the elderly make them more vulnerable to abuse? In what ways?, and (4) What characteristics of the perpetrators make them more likely to abuse? In what ways?

The major risk factors for elder abuse identified by participants were: mental and physical health issues associated with aging, such as dementia (discussed by 9 of 10 participants); caregiver stress or caregiver burnout (discussed by 8 of 10 participants); and inadequate resources, both financial and social, which was also a factor of caregiver stress (discussed by 6 of 10 participants). In regards to aging, one participant stated, "Cognitive issues come into the picture where people become more susceptible to dementia and, therefore, they're more dependent on others, more fearful of speaking up for themselves and being assertive" (Participant #08, personal interview, February

2014). On caregiver stress, one participant stated, “If the caregivers aren’t taking enough time to care for themselves and don’t have enough support or are elderly themselves, it could breed resentment. You’re tired, you’re angry, and you might say or do things you wouldn’t ordinarily” (Participant #03, personal interview, February 2014). Finally, regarding resources, one participant stated, “I think dependency, physical conditions, sometimes financial situations, lack of resources make people dependent on other people, family members – lack of social support, lack of financial support” (Participant #10, personal interview, February 2014).

Other notable risk factors discussed by participants included caregiver substance abuse, caregiver history of abuse, pride (linked to elder self-neglect and underutilization of services), the loss of status/value of the elderly, and the trusting and/or naïve nature of some elderly which may leave them vulnerable to abuse. For example, one participant stated, “It’s a pride factor – more with male than female. It’s also a hard transition for anybody. You’re used to being independent, doing things for yourself. Why should you give it up?” (Participant #02, personal interview, February 2014). Another participant suggested,

I think a lot of it has to do with the fact that they’ve kind of lost their voice in society, in the community and in their families. They lose their status in the family a lot of times because of declining health, so I think that it becomes easier for the caregivers to take advantage. (Participant #05, personal interview, February 2014)

Cultural Considerations

The next set of interview questions focused on cultural factors to consider when assessing or addressing elder abuse. The questions were: (5) In what ways do race and ethnicity effect the perception of elder abuse?, (6) In what ways do race and ethnicity effect the incidence of elder abuse?, (7) In what ways do race and ethnicity effect the reporting of elder abuse?, (8) In what ways do race and ethnicity effect service utilization by victims of elder abuse?, (9) What impact does the social worker's race or ethnicity have on identifying elder abuse, if any?, and (10) What other cultural factors contribute to elder abuse?

The cultural factors most discussed by participants were: maintaining family privacy, which seemed to be closely related to the perception of seeking help or accepting services as taboo (each discussed by 6 of 10 participants); feeling more comfortable with and more understood by a social worker from the same cultural background (discussed by 6 of 10 participants); and the value placed on the elderly (discussed by 5 of 10 participants). Regarding privacy, one participant stated, "Certain cultures are very private about things. They take care of their own, they take care of everything in-house, and they don't seek outside help. So I think it would be across the board, even in elder abuse situations" (Participant #05, personal interview, February 2014). Regarding the cultural background of the social worker, one participant stated,

Sometimes the family feels more comfortable with a social worker of their same race or ethnicity. Sometimes people feel misunderstood if they don't

have a social worker that mirrors their same race or ethnicity and sometimes they don't feel as open to expressing what's going on.

(Participant #01, personal interview, February 2014)

Another participant noted language specifically, stating, "Even though I can give them some comfort, I don't think it's totally effective because I'm not speaking their language and I don't think I'm fully being understood and I don't think I fully understand them sometimes" (Participant #02, personal interview, February 2014). Finally, regarding the value placed on the elderly, one participant stated, "I think that certain cultures have a high regard for the elderly so, even in their declining capacities, they're still respected so the abuse in those cultures I think is a lot less likely to occur" (Participant #10, personal interview, February 2014).

Notably, one participant emphasized the importance of education over cultural considerations, stating, "I think it really goes back to how educated you are about information and how to use it, regardless of what your race or ethnicity is" (Participant #06, personal interview, February 2014). A few participants discussed in particular the impact of the social worker's own culture on him- or herself. For example, one stated,

Something that we all have to be very much aware of is not bringing our biases into it. We always have to be aware that we're bringing our cultural and our ethnic perspective into our work and, of course, we have our own perceptions of other cultures and ethnicities that we have to consider, and

try to be as objective as you can about the situation. (Participant #08, personal interview, February 2014)

Developing Cultural Sensitivity

The last set of interview questions aimed to develop recommendations for cultural sensitive social work practice in regards to addressing elder abuse. The questions were: (11) What training have you received regarding elder abuse, if any?, (12) What training have you received regarding cultural competence and elder abuse, if any?, (13) What are your agency's established procedures for addressing elder abuse, if any?, (14) In the last year have you reported any suspected elder abuse to Adult Protective Services? Please describe the case in as much detail as you can and are comfortable with, and (15) What can social workers do to identify, prevent and address elder abuse in a more culturally sensitive manner?

All 10 participants discussed elder abuse training they have received. One participant stated, "I've received training on reporting requirements, law and ethics as they relate to elder abuse. I've received training on just generally dealing with older populations, some of the mental health issues, social issues, so lots of different trainings" (Participant #01, personal interview, February 2014). Another stated, "I can't remember what I learned in school. That was too long ago. I've been to workshops, nothing recently. When I was working at the hospital they had these all the time. I think they should be mandatory" (Participant #02, personal interview, February 2014). Five of 10 participants

reported that they have received specific training on both cultural sensitivity and elder abuse, while the remaining participants indicated that they have not. One participant stated, “I can’t recall anything specifically. I think I’ve learned them separately and integrated them on my own. I think that would be really helpful though” (Participant #10, personal interview, February 2014).

All 10 participants recommended that education (workshops, trainings, personal research, consultation) was necessary to develop cultural sensitivity in regards to elder abuse. One participant stated,

I think a lot of times, unfortunately, when you get out of school and you start working for different agencies, there’s not as much professional development in that arena. So, I think it’s kind of on us as social workers to seek out supplementary trainings, to keep that idea of respectful curiosity and inquire and try to learn firsthand. I just think actively seeking out opportunities to learn about other cultures and, as it just comes along with your career, you go along and meet different people and ask questions. (Participant #03, personal interview, February 2014)

Another participant stated,

Education is key. Definitely, the more you know about cultures and ethnicities and what their perspective is, it’s going to be helpful. I think it’s invaluable to know we’re not all the same. We have different viewpoints, different values. Be informed about as much as you can. Ask the clients to talk to you about it – What is considered normal? Does this seem unusual

to you? Tell me more about your culture in terms of how this is typically handled. What's the family dynamic in this situation? (Participant #08, personal interview, February 2014)

Another participant stated, "Everybody has their own belief system when it comes to their culture. We don't have to always agree but to respect where they're coming from. I think if you can start there then you have something to work with" (Participant #06, personal interview, February 2014).

A few participants discussed culture of the social worker. One participant gave a notable response, stating, "There's definitely a culture here among staff – you don't rat out your own. Writing people up for abuse, you run into a lot of retribution – not from the system but there's definitely a culture" (Participant #07, personal interview, February 2014). Another participant stated,

As social workers, we're our own culture in a way. We're taught these things, we're taught how to identify them. We're trained professionals, we're mandated reporters. We're going to see things a little differently than the families that might be at risk. (Participant #03, personal interview, February 2014)

Another participant offered a personal example which highlighted the importance of cultural sensitivity, stating,

When the social worker from APS showed up at their door, she had a police officer with her and it really was traumatic for the wife because they were holocaust survivors and that brought images of Nazis coming

through the door. I felt very bad about that, that I didn't give her a heads up and explain the procedure to her. (Participant #08, personal interview, February 2014)

Finally, one participant encapsulated the importance of developing cultural sensitivity, stating, "This is an important issue, especially in light of our country being multiethnic, multicultural. You have to be aware of all the differences and all the similarities to be able to help patients and deal with these things" (Participant #10, personal interview, February 2014).

Summary

This chapter presented the data collected. Participants discussed risk factors for elder abuse, cultural factors to consider, and recommendations for developing cultural sensitivity. The primary risk factors for elder abuse, as discussed by participants, included mental and physical health issues associated with aging, caregiver stress, and inadequate resources. Participants identified cultural factors to consider when working with the elderly population, particularly the value of maintaining privacy and the perception of seeking help and accepting services as taboo, the impression that some clients may be more comfortable with a social worker of the same cultural background, and the value placed on the elderly. Finally, participants recommended that education on cultural factors and norms as well as self-awareness were key in developing cultural sensitivity in identifying, preventing and addressing elder abuse.

CHAPTER FIVE

DISCUSSION

Introduction

This chapter discusses the key findings of the present study, which explored cultural sensitivity and elder abuse in social work practice. Also discussed in this chapter are the limitations of the study, as well as recommendations for social work practice, policy and research in elder abuse.

Discussion

Findings of the present study are consistent with the literature in terms of risk factors for elder abuse, cultural considerations, and recommendations for developing cultural sensitivity for social work practice. Although much of the literature on elder abuse and culture focuses on factors unique to particular cultural groups, the present study sought to identify considerations for developing a comprehensive cultural sensitivity, thus aiming to be practical for social workers in many settings and working with elders of various cultural backgrounds.

This study found that social workers are knowledgeable about risk factors for elder abuse. The most significant risk factors identified (i.e., mental and physical issues associated with aging, caregiver stress, and insufficient resources) were consistent across participants and consistent with the literature (Barker, 2000; Mihaljcic & Lowndes, 2012; Parra-Cardona, Meyer, Schiamberg, & Post, 2007; Sandmoe, Kirkevold, & Ballantyne, 2011). Yaffe, Wolfson, and

Lithwick (2009) found that social workers in particular, compared to doctors and nurses, felt strongly that considering risk factors was vital to assessing for elder abuse and should be included in elder abuse assessment questionnaires.

Another key finding of this study was that social workers are knowledgeable about cultural considerations in assessing elder abuse. Interestingly, all participants discussed considerations for working with collectivistic cultures and most specifically discussed Asian cultures, which is consistent with the abundance and availability of literature on elder abuse in Asian cultures (Arai, 2006; Chang & Moon, 1997; Lee, Lee, & Eaton, 2012; Pablo & Braun, 1997; Tam, 2006). Participants of this study particularly discussed the value of family privacy, the perception of seeking help and accepting services as taboo, and the value placed on the elder, which are also consistent with the literature on Asian cultures, such as Japanese (Arai, 2006) and Korean and Filipino (Pablo and Braun, 1997).

A notable finding of this study is that social workers believe that clients and families may feel more comfortable with and more understood by social workers of the same cultural background. Although awareness of language barriers and cultural norms has been discussed extensively (Chang & Moon, 1997; Horsford, 2011; Pablo & Braun, 1997; Parra-Cardona et al., 2007; Simpson, 2005; Smyer & Clark, 2011), the particular finding that sharing the same cultural background is favorable appears to be unique to this study. While

this may simply be a perception of the participants and unsupported by research on client beliefs, it is a finding worth noting.

Finally, another key finding of this study was the perceived need for education in order to develop cultural sensitivity in identifying, preventing and addressing elder abuse in social work practice. Participants discussed education as comprising formal trainings, research, consultation and personal self-awareness. This finding is consistent with the literature in that cultural sensitivity training is needed, consulting with families on cultural issues is effective, and providers should examine their own communication with clients and be aware of their own values (Arai, 2006; Horsford, 2011; Smyer & Clark, 2011; Vandsburger, Curtis, & Imbody, 2010). This finding is also consistent with the literature on social workers' perceived needs. Policastro and Payne (2014) found that university social work students do not know enough about elder abuse, are not exposed to the needed information before they enter the field, and desire to learn more. Although formal training and workshops were discussed by all participants, personal experience appeared to have unique practical value. This particular factor was not discussed in the literature reviewed and is a point worth noting.

Implications for Social Work Practice, Policy and Research

Understanding what social workers know and what areas need to be emphasized is important for developing new and more comprehensive training programs. Programs that specifically incorporate cultural sensitivity training with elder abuse training was a need identified by participants. Thus, agencies may

help foster cultural sensitivity by developing and offering trainings geared towards commonly served populations, as well as offer opportunities for personal development, such as community-based training and consultations. University courses with such content may also be developed and integrated into social work programs in order to ultimately improve the quality of services provided by new professionals. Implications for policy may include up-to-date cultural sensitivity training to be mandatory for practitioners.

Future research may focus on perceptions of elderly clients and families about their social worker, services, and elder abuse. It is important to understand the perceptions of both the provider and the client for effective culturally sensitive interventions. Future research may also focus on how cultural values conflict or coincide with elder placement in facilities or in the care of non-family members. Participants of this study seemed to have differing perceptions of the advantages and disadvantages of placement, likely dependent on their own cultural values. Finally, future research may focus on cultural aspects not discussed by the participants of this study, such as sexual preference or religion. In light of our society, especially Southern California, being very culturally diverse, it is important to take into consideration cultural aspects beyond race and ethnicity and socioeconomic status.

Limitations

Limitations of this study include sample issues and conceptual issues. The sample of 10 participants may be too small to generate meaningful data and to

generalize findings to all social work practitioners. Further, the sample was greatly skewed in that 80% of the sample was female and 70% identified as white, reflecting a very particular group likely not representative of the whole. Responses may have been enriched with a more diverse sample. It was difficult to recruit participants for the study, possibly because of the sensitive nature of the topic. Also, the views expressed by participants may or may not have been reflective of their personal belief, but rather socially desirable responses. A quantitative study may have allowed for a larger sample and more candid responses, while possibly sacrificing the generative nature of qualitative interviews.

The purpose of the present study was to develop recommendations for developing cultural sensitivity in working with elder abuse, as informed by social workers. This narrow purpose and utilizing an extensive interview guide may have been a limitation. Developing particular hypotheses or focusing on a particular cultural group or intervention may have resulted in clearer and more definite results. Most of the participants, however, provided useful insight and drew from personal experiences which are unique to the literature.

The interview guide has its own limitations. The questions about risk factors did not directly relate to the topic of focus, namely cultural factors. Also, having multiple questions regarding race and ethnicity did not draw any particularly unique responses per question. In fact, specifying race and ethnicity may have influenced participants to focus on those cultural factors rather than

others that may not have been directly asked of, such as socioeconomic status, sexual preference, religion, etc.

Conclusions

This study aimed to establish practical guidelines and cultural considerations for identifying, preventing and addressing elder abuse as informed by social workers. By using a qualitative design, this study was able to focus on unique experiences and insights of the participants and generate new ideas and considerations for practice. While some of the factors discussed were applicable to many different populations, the majority of responses truly highlighted risk factors and cultural factors that are perceived as unique to the elderly population and important by participants. The consistency across participants as well as with existing research suggests that these findings, particularly the recommendations for developing cultural sensitivity in elder abuse work, are worth adopting and worth further exploration.

APPENDIX A
INTERVIEW GUIDE

Participant ID#: _____

**CULTURALLY SENSITIVE ELDER ABUSE INTERVENTIONS
AS INFORMED BY HOSPICE SOCIAL WORKERS**
Interview Guide

Demographic Information

Age: _____

Gender:

- Male
 Female

Race/Ethnicity:

- White
 Black or African American
 Hispanic
 Asian
 Pacific Islander
 Native American
 Other (please specify): _____

Years of experience working with elderly population: _____

Degree/License:

- MSW
 LCSW

Interview Questions

1. In your opinion, what constitutes elder abuse?
2. What factors contribute to elder abuse?
3. What characteristics of the elderly make them more vulnerable to abuse? In what ways?
4. What characteristics of the perpetrators make them more likely to abuse? In what ways?
5. In what ways do race and ethnicity effect the perception of elder abuse?
6. In what ways do race and ethnicity effect the incidence of elder abuse?
7. In what ways do race and ethnicity effect the reporting of elder abuse?
8. In what ways do race and ethnicity effect service utilization by victims of elder abuse?
9. What impact does the social worker's race or ethnicity have on identifying elder abuse, if any?
10. What other cultural factors contribute to elder abuse?
11. What training have you received regarding elder abuse, if any?
12. What training have you received regarding cultural competence and elder abuse, if any?
13. What are your agency's established procedures for addressing elder abuse, if any?
14. In the last year have you reported any suspected elder abuse to Adult Protective Services?
 - a. Please describe the case in as much detail as you can and are comfortable with.
 - b. How did you learn about this case?
 - c. What type of abuse was it? (physical, psychological, financial, neglect, sexual, other)
 - d. Victim's age and gender, perpetrator's age, gender and relationship to victim
 - e. What factors shaped the abuse, cultural or otherwise?
 - f. How was the case resolved?
15. What can social workers do to identify, prevent and address elder abuse in a more culturally sensitive manner?

Developed by Katherine Bernardo

APPENDIX B
INFORMED CONSENT

INFORMED CONSENT FORM
CULTURAL SENSITIVITY AND ELDER ABUSE:
CONSIDERATIONS FOR SOCIAL WORK PRACTICE

The study in which you are being asked to participate is designed to investigate cultural factors related to elder abuse and elder abuse interventions. This study is being conducted by Katherine Bernardo under the supervision of Janet Chang, Ph.D., School of Social Work, California State University, San Bernardino. This study has been approved by the School of Social Work Subcommittee of the Institutional Review Board, California State University, San Bernardino.

PURPOSE: The purpose of this study is to explore culturally sensitive interventions used by social workers to prevent, identify and address elder abuse.

DESCRIPTION: The interview will comprise open-ended questions designed to gain insight into elder abuse through your professional experience and expertise. Interviews will be audio recorded and transcribed for analysis.

PARTICIPATION: Participation in this study is voluntary. Refusal to participate will involve no penalty or loss of benefits to which you are otherwise entitled. You may discontinue participation at any time without any penalty or loss of benefits to which you are otherwise entitled.

CONFIDENTIALITY: Your confidentiality will be maintained throughout the duration of the study and thereafter. No identifying information will be collected. Audio recordings, informed consent forms and any other confidential research material will be transported and stored in locked cases. Research materials will be destroyed upon completion of the project.

DURATION: The interview process will last 15-20 minutes.

RISKS: There are no anticipated risks to this study. The researcher has completed training on research ethics and conducting interviews.

BENEFITS: You will receive a \$5 gift card for your participation in this study. Your participation will contribute to a growing body of literature on culturally sensitive elder abuse interventions, and ultimately contribute to efforts to improve practice.

CONTACT: If you have any questions or concerns about this research, you may contact Janet Chang at jchang@csusb.edu or (909) 537-5184.

RESULTS: Once the study is complete, findings may be obtained at California State University, San Bernardino Pfau Library after December 2014.

I have read and understand the consent form and agree to participate in this study.

I consent to have my interview audio recorded.

Please place an X here: _____ Date: _____

APPENDIX C
DEFRIEFING STATEMENT

DEBRIEFING STATEMENT
CULTURAL SENSITIVITY AND ELDER ABUSE:
CONSIDERATIONS FOR SOCIAL WORK PRACTICE

The study you have just completed was designed to investigate cultural factors related to elder abuse and elder abuse interventions. As a social service provider, your experience with this vulnerable population offers critical insight into elder abuse research. This project is particularly interested in developing guidelines for culturally sensitive elder abuse interventions.

Thank you for your participation in this study. If you have any questions or concerns about the research, please feel free to contact Janet Chang at (909) 537-5184. If you would like to obtain a copy of the findings of this study, they will be available at California State University, San Bernardino Pfau Library in Summer 2014.

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