Human Resources and Social Development Canada

Family Violence - Applying Lessons Learned to Elder Abuse
Final Report

By:

Deborah Norris, PhD

Pamela Fancey, MA

Date:

July 31, 2008

Human Resources and Social Development Canada

Family Violence - Applying Lessons Learned to Elder Abuse
Final Report

By:

Deborah Norris¹, PhD

Pamela Fancey², MA

with contribution by Erin Power

Date:

July 31, 2008

In partial fulfillment of contract 9137-07-0010 between Mount Saint Vincent University's Nova Scotia Centre on Aging and Human Resources and Social Development Canada

¹Department of Family Studies and Gerontology, Mount Saint Vincent University, Halifax, Nova Scotia

²Nova Scotia Centre on Aging, Mount Saint Vincent University, Halifax, Nova Scotia

Notices

The views expressed in this report are the authors and do not necessarily reflect the opinions of Human Resources and Social Development Canada or of the federal government.

Human Resources and Social Development Canada **Publications Centre** 140 Promenade du Portage, Phase IV, Level 0 Gatineau, Quebec, Canada K1A 0J9

Facsimile: (819) 953-7260

http://www.hrsdc.gc.ca/en/gateways/nav/left_nav/publications.shtml

Acknowledgements

The authors would like to acknowledge with thanks Research Assistants Pamela Ross and Erin Power. Pamela - for her work with the literature searches, organizing focus groups and interviews, transcription, and assistance with the preparation of this report. Erin - for her analytical and synthesis work for the preparation of this report.

The authors gratefully acknowledge the individuals who gave of their time and expertise to participate in a personal interviews or focus group. Their commitment to the eradication of abuse and neglect of persons young and old is impressive.

Finally, sincere appreciation is extended to our partners - Alice Housing and the Nova Scotia Department of Seniors for providing guidance and thoughtful advice throughout this project.

Table of Contents

E	xecutive	e Summary	V1
		•	
1.	Bacl	ekground and Overview	
	1.1	Background	
	1.2	Purpose of this Report	
	1.3	Methodology	3
	1.3.1	1 Literature review	4
	1.3.2	2 Databases	4
	1.3.3	3 Search terms	5
	1.4	Focus Groups	5
	1.4.1	1 Procedure.	5
	1.4.2	2 Analysis	6
	1.5	Key Informant Interviews	
	1.5.1	·	
	1.5.2	2 Analysis	7
	1.6	Methodological Challenges	
	1.7	Value Added Regarding Primary Research	
	1.8	Organization of the Report	
			_
2.	Wha	at We Know About Family Violence	9
	2.1	Overview	
	2.2	Family Violence: A Life Span Approach	
	2.3	Socio-political Context	
	2.4	Theoretical Frameworks	
	2.4.1		
	2.4.2	•	
	2.4.3		
	2.4.4	1	
	2.5	Naming	
	2.6	Risk Factors	
	2.6.1		
	2.6.2		
	2.6.3	· · · · · · · · · · · · · · · · · · ·	
	2.7	Measuring Family Violence	
	2.8	Reporting	
	2.9	Screening and Assessment	
	2.10	Interventions	
	2.10		
	2.10	_	
	2.10	Summary	
	2.11	Summary	
3.	Whe	at Do We Know About Older Adult Abuse?	27
J.	3.1	Overview	
	3.1	Socio-political Context	
	3.3	Theoretical Framework	
	ر.ر	THEOTERICAL TRAINEWOLK	31

3	3.1	Situational theory.	31
3	3.2	Social exchange theory.	32
3	3.3	Symbolic interaction approach.	
3.3	3.4	Feminist model	
3.4	Na	ming	33
3.5	Re	porting	34
3.6	Scr	reening and Assessment	35
3.7		ervention	
3.	7.1	Programs and services	36
3.	7.2	Policy and legislation.	37
3.8	Sui	mmary	39
4. W		an Be Transferred to Older Adult Abuse	
4.1	Α (Critical-Ecological Perspective on Violence - A Unifying Framework	41
4.2	Cri	tical Theory	41
4.2	2.1	Power and Control.	41
4.2	2.2	Transformation	42
4.3		ological Theory	
4.4	The	e Critical-Ecological Model for Older Adult Abuse	
4.4	4.1	The macrosystem.	43
	4.2	The exosystem.	
	4.3	The mesosystem.	
	4.4	The microsystem.	
4.4	4.5	Critical ecological framework	46
5. Reco	mmei	ndations: Developing a Research Agenda for Older Adult Abuse	48
REFER	RENC	ES	51
APPEN	IDIX	A	60
		_	
APPEN	IDIX.	R	61

Executive Summary

This report is one of five commissioned for a Round Table on Elder Abuse organized by Human Resources and Social Development Canada being held on June 18-19, 2008 in Ottawa. The focus of this report is on lessons learned from the research and practice on family violence that may be relevant to advancing work on the topic of abuse and neglect of older adults.

Abuse and neglect of older adults is not a new social problem but one of growing importance at both the federal and provincial levels. It is estimated that between 4% and 10% of older adults in Canada experience some type of abuse. This is likely a conservative estimate due to challenges associated with general awareness, definitions and reporting practices. In part, the invisibility of this social problem can be attributed to the same complexities that characterize family violence. However, given the expected increase in the older population and the insidious nature of violence against older persons, it is an issue that requires attention.

Decades of research and practice in the area of family violence provide an excellent foundation to advance an understanding of abuse and neglect of older adults. There are various explanations and theories about the causes of family violence including psychological, sociological and structural/political perspectives, but these by and large offer only partial or incomplete explanations and do not transfer well to the area of abuse of older adults. There is growing evidence that family violence is a much more complex problem than disagreements that occur in everyday family life. Systemic inequalities associated with economic (capitalism) and gender ideologies (patriarchy) characteristic of our culture reinforce the power imbalances within the family that can result in abuse. Abuse of older adults can be understood, in part, as family violence that emerges at a particular phase of the life course, or, it may be intimate partner violence that has "grown older". Age, however, exacerbates the power imbalances that are at the core of family violence in general. This contention opens the door to further exploration of the ways in which the ideology of ageism intersects with others that sustain the abuse of power at both the familial and societal levels.

Drawing on existing published and unpublished literature, interviews with key informants and focus groups with professionals working in the fields of family violence and abuse of older adults, this report explores various ideologies to better explain the root causes of family violence across the life course which, in turn, can lead to more effective solutions and remedies. It also examines lessons from family violence related to definitions, measurement, screening and assessment protocols and reporting practices. From this review, similar issues between family violence and older adult abuse emerge such as inconsistent definitions and limiting screening protocols which impact on reporting practices and the scope of information available. This has implications for intervention approaches that stakeholders may consider resulting in an uncoordinated or ineffective response and inappropriate use of resources. As well, barriers to reporting such as general lack of awareness, shame/humiliation, denial, fear of consequences, fear of retaliation

impact on the capacity to fully understand the scope of the issue and perpetuate the invisibility of these insidious acts. For the population who are deemed vulnerable because of physical or cognitive frailty, adult protection legislation has been a policy instrument used to ensure acts against the most vulnerable are identified and remedies sought but at the same time this practice raises concerns about paternalism and possible infringement on individual's rights and freedoms. This is an area that work on family violence is unable to offer guidance.

Moreover, responses to family violence in general and older adult abuse specifically vary throughout the country, again, largely due to lack of a unifying framework and consensus on how to proceed. While the Criminal Code is one vehicle through which violence within families and against older adults can be addressed, it is not a commonly used mechanism. Particularly for situations involving older adults, changes in physical and mental health can result in the older person being unavailable as a witness. Provincially, a range of approaches exist. Some provinces have specific family violence legislation while others deal with such cases through existing family and social services legislation. The Family Violence Court in Manitoba is an example of one province with dedicated legislation, processes and resources to deal with cases of family violence, but less than 2% of cases involve violence against older adults. This low utilization rate suggests that this approach is less appropriate for dealing with the complex and sensitive issues related to abuse and neglect of older adults.

While numerous theoretical frameworks offer unique perspectives and insights into the fields of family violence and older adult abuse in particular, they have contributed to fragmented knowledge and understanding about very complex social problems. As a way to bridge the various perspectives and advance work in the field of older adult abuse, a critical-ecological framework is proposed as a unifying lens. This framework considers the intersections that occur between four levels of the environment - the family, the family's social network, and social support networks within the community, society, and dominant ideologies. As a *critical*-ecological framework, the ways in which social inequalities are sustained and rendered visible through the abuse of power and control at each level of the environment can also be understood. It is posited that this framework offers a beneficial holistic approach to conceptions of family violence across the lifespan and also has merit for discussing aspects of theory, policy and practice that transfer from family violence in general to older adult abuse in particular.

Finally, recommendations are offered to help develop a research agenda for older adult abuse. The recommendations are grouped thematically, specifically, *understanding the experience*, *theoretical frameworks*, *research methodologies*, and *programs*, *policies*, and *legislation*.

Understanding the experience

- Analyze the relational paradoxes inherent in the everyday experience of older adult abuse.
- Identify the risk factors for older adult abuse.

Theoretical frameworks

- Develop conceptual frameworks to advance research in older adult abuse that extend the analysis beyond individualized and situational explanations (such as caregiver stress theory) to include ideological and structural factors.
- Analyze the intersection of ageism with patriarchy, capitalism, and familialism within the realm of older adult abuse.
- Analyze the ways in which ageism transcends gender.

Research methodologies

- Develop and refine research methodologies that support the analysis of contexts, meanings, and motives.
- Analyze the contexts, meanings, and motives related to the prevalence and incidence of abuse to older adults.
- Develop and apply a critical-ecological framework to research on older adult abuse.

Program, policy, and legislation

- Use the critical-ecological framework to identify prevention and intervention strategies that emerge from individual, family, and socio-political experiences and influences.
- Develop and evaluate community-development models for research, prevention, and intervention that support the agency and empowerment of older adults.
- Develop and evaluate collaborative practice models that focus on the integration of older adult abuse with other forms of family violence across the lifespan.
- Examine current approaches to legislation, particularly alternatives to mandatory reporting policies.

1. **Background and Overview**

1.0 *Introduction*

This report, prepared for Human Resources and Social Development Canada, focuses on lessons learned from the research and practice on family violence that may be relevant to advancing work on the topic of the abuse and neglect of older adults.¹

1.1 Background

Abuse and neglect of older adults is not a new social problem but one of growing importance. At the federal level it has been identified as a priority area by Human Resources and Social Development Canada and the National Seniors Council. Similarly, at the provincial level, several provinces have recently adopted strategic plans or campaigns to move this issue into the public domain (e.g., Newfoundland, Nova Scotia, Québec, Manitoba).

While there are assorted definitions of what constitutes abuse and neglect of older adults, in the broadest sense any action or lack of action by someone in a position of trust that harms the health or well being of an older person can be considered abuse. It can take different forms (e.g., physical, psychological, sexual, financial) and occur in different settings (e.g., home, in the community, in acute and long-term care facilities). It is an issue that affects individuals, families, and communities and has both social and economic costs.

Estimates show that between 4% and 10% of older adults in Canada experience some type of abuse (Government of Canada, 2007). This is likely a conservative estimate due to challenges associated with general awareness, definitions, and reporting practices. In part, the invisibility of this social problem can be attributed to the same complexities that characterize family violence. However, given the expected increase in the older population and the insidious nature of violence against older persons, abuse is an issue that requires attention.

1.2 Purpose of this Report

The goal of this report is to provide a synthesis of lessons learned from years of practice and research on family violence. Similar to the issue of abuse and neglect of older adults, family violence is a consistent and widespread social problem within Canada. It crosses all socio-economic, religious, and ethno-cultural boundaries. Social, economic, and political impacts affect every Canadian family and society as a whole.

Family violence is defined as the abuse of power within relationships of intimacy, kinship, dependency, or trust (National Clearinghouse on Family Violence, 2007).

¹ An earlier version of the research was presented at a Round Table on Elder Abuse held in Ottawa on June 18-19, 2008 and organized by Human Resources and Social Development Canada. Feedback from these in attendance gave direction for the model presented in Section 4.

Furthermore, the scope of this issue has broadened to include physical, psychological, spiritual, financial/material, and sexual abuse and neglect.

Similar to understanding causes of older adult abuse, one major misconception about family violence is that violence is a result of conflict within familial relationships. While insights gained from such thinking are valuable, focusing on aspects of family life alone yields partial and incomplete explanations and preserves the assumption that family violence is a private matter rather than a social problem and a social responsibility.

There is growing evidence that family violence is a more complex problem than disagreements that occur in everyday family life. Systemic inequalities associated with economic (capitalism) and gender ideologies (patriarchy) characteristic of our culture reinforce the power imbalances within the family that can result in abuse. Considering such macro-level structures and societal underpinnings better explains the root causes of family violence across the life course which, in turn, can lead to more effective solutions and remedies.

The abuse of older adults can be explored, in part, as family violence that emerges at a particular phase of the life course, or it may be intimate partner violence that has "grown older". Age, however, exacerbates the power imbalances that are at the core of family violence in general. This contention opens the door to further exploration of the ways in which the ideology of ageism intersects with others that sustain the abuse of power at both the familial and societal levels. Moreover, the dependency of some older adults on their caregivers increases their vulnerability while other research suggests that abuse of older adults is precipitated by the inherent dependency of the caregiver on the older adult.

Exploring frameworks and theories are but one example of how reviewing the knowledge gained from theory and practice in family violence can help shape and advance work on the issue of the abuse and neglect of older Canadians. Other foci of this report include reviewing what is known regarding naming, measuring, assessing family violence, as well as current practices with respect to programs and legislation. Therefore, specific objectives of this research include reviewing what is understood concerning the causes, consequences and implications of family violence; identifying gaps in knowledge and articulating lessons to be learned from the field of family violence. A conceptual framework is presented as the culmination of this analysis. This framework positions older adult abuse as a phenomenon situated within the broader realm of family violence, but also as a social problem with its own particular causes, consequences and solutions. The framework can serve as a springboard for the ongoing development of knowledge, practice, and policy on the issue of older adult abuse. As well, recommendations related to the development of a research agenda on older adult abuse are offered.

1.3 *Methodology*

Various methodologies were employed to achieve the study's objectives. They include: a systematic and comprehensive search of published and unpublished literature, personal interviews with select key informants to elicit a finer understanding of specific programs, policies, or approaches and the facilitation of focus groups with representatives from various sectors and disciplines to help identify key issues and gaps with respect to family

violence and abuse of older adults.² In addition, the project's partners- Alice Housing and Nova Scotia Department of Seniors- participated in the focus groups and provided feedback on various drafts of this research. Their perspectives helped to ensure this research has utility in the practice and policy fields.

1.3.1 *Literature review.*

A continuous search of published and unpublished literature was explored throughout this research to identify what is known about how family violence has influenced approaches to older adult abuse. This review included published academic literature from Canadian and international sources as well as Internet searches to identify pertinent literature published by government and other organizations. The literature that discussed or provided examples of transferability of knowledge and practice from family violence to the field of older adult abuse was also explored. Furthermore, legislation and other public policies that govern these areas were included. The literature also examined the historical context of both family violence and abuse of older adults in terms of the theoretical background, governing legislations, and changes throughout history within societal perceptions and attention to these areas.

1.3.2 Databases.

Various databases were explored through the development of this paper. Relevant research related to family violence and abuse of older adults emerged from this exploration. The following databases were utilized through Mount Saint Vincent University web access: Academic Search Premier, Ageline, Child Development, Child and Youth Studies, EBSCO Host, Education Research Complete, ERIC (Educational Resources Information), Family Studies and Gerontology, Gender Studies, Humanities, ProQuest, Psychology (PSY), and Sociology (SOC).

To capture a comprehensive depth of information from various outlets, including government documents, the following fields were investigated: Canadian Network for the Prevention of Elder Abuse (CNPEA), Centre for Disease Control and Prevention (CDC), Cycle of Violence, Federal, Provincial, and National Government websites, Government of Canada, Health Canada, Health and Welfare Canada, Indian and Northern Affairs Canada, LaMarsh Research Centre on Violence and Conflict Resolution, National Aboriginal Circle against Family Violence, National Centre for Health Statistics, National Clearinghouse on Family Violence, Nova Scotia Advisory Council on the Status of Women, Nova Scotia Health, Mi'kmaw Family Healing Centre, Muriel McQueen Fergusson Centre for Family Violence Research (UNB), Public Works and Government Services Canada, Seniors Resource Centre of Newfoundland and Labrador, Statistics Canada, Supply and Services Canada, Health and Wellness Canada, University of Calgary (Resolve), University of Manitoba (Resolve), and the Vanier Institute of the Family.

² This primary research was conducted with approval of Mount Saint Vincent University's Ethics Review Board (certificate # 2007-071).

1.3.3 Search terms.

To ensure that the literature was thoroughly searched the search terms remained broad. The following are the terms that were explored through the databases: adult protection and family violence, adult protection and elder abuse, adult guardianship and older adults, adult guardianship and abuse, women abuse, wife assault, wife abuse, wife abuse and power, marital violence, partner violence, intimate partner violence family abuse and women, family conflict, family violence, victims of family violence, Canadian violence and family, intra-familial violence, extra-familial violence, historical family abuse, historical family violence, historical family conflict, abusive parents, adolescent abuse, sibling abuse, elder abuse and family violence, elder abuse, elder abuse and mandatory reporting, victims of violence, theory and violence, feminism and abuse, feminist theory and wife abuse, ecological theory and family violence, ecological theory and elder abuse, dementia abuse, family abuse and programs, programs and abuse, policy and abuse, policy and family violence, myths and abuse, stigmas and abuse, abuse, language, and financial abuse.

1.4 Focus Groups

To examine the lessons learned from family violence and how they apply to the abuse of older adults, focus groups were facilitated by both the primary and co-investigators. Two focus groups consisting of seven and nine participants respectively included individuals from various government, non-profit, and community organizations within Nova Scotia (see Appendix A). These groups were held to elicit knowledge as it related to family violence and the abuse of older adults. Participants were selected by their knowledge and experience working within the realm of family violence or the abuse of older adults. The focus groups supplement and complement the literature as well as provide a practice-based validation of the analysis and critique of the literature.

1.4.1 *Procedure.*

An invitation letter was sent to potential participants outlining the scope and process of both the study and focus group. Upon agreement to participate, two consent forms were subsequently sent. The first consent form outlined the protocols for participating in the study and sought agreement for participating on these terms and the second form solicited consent for the audio-recording of the focus group. Participants signed the consent forms before the focus group commenced. Focus groups were held at Mount Saint Vincent University and lasted approximately two hours in duration. The focus groups were audio recorded and later transcribed verbatim using the software, *Express Scribe*.

Participants were asked to discuss projects or policies they have been involved with relating to family violence or the abuse of older adults and the challenges and opportunities they have experienced. Sample questions were; would you share with us some challenges your organization has encountered in terms of policies, programs, and/or services in dealing with issues of family violence? Participants were also asked to

³ The project partners- Alice Housing and Nova Scotia Department of Seniors- assisted with identifying relevant participants.

identify gaps in the existing knowledge of abuse among older adults by answering, what, if any, are some common misperceptions about abuse involving older adults. Lastly, practitioners were asked to critically asses a draft of an analytical framework that situated older adult abuse in the domain of family violence for example, our research suggests (insert relevant findings), what are the strengths and weaknesses of these findings?

1.4.2 Analysis.

Transcripts were analyzed by way of comparing similar or contrasting themes. The transcripts were also able to provide the research with suggestions for applying lessons from family violence as it relates to the abuse of older adults. Furthermore, this analysis helped to inform recommendations on future research and research priorities, as well as implications for family violence policy and program development.

1.5 Key Informant Interviews

Six interviews were conducted with key informants throughout Canada from various governments, academic, and community organizations (see Appendix B). Interviews were approximately one hour in duration and participants were selected based upon their organizations contributions and involvement with family violence or the abuse of older adults. The questions asked in the interviews were tailored to fit the role of the key informant's organization and were conducted individually by either the lead investigator or co-investigator. The questions focused on specific information relevant to programs, policy, or research in relation to the abuse of older adults or within the domain of family violence.

1.5.1 Procedure.

An invitation letter was sent to potential interviewees outlining the intent of the study and a request to partake in a telephone interview. Upon confirmation of the interview, participants then received a consent form outlining the research protocol. A request to consent to participate on these terms and to audio-record the interview was also conveyed through the consent form. Participants were asked to return the form prior to the interview. Interviews were audio-recorded and later transcribed verbatim using the software, *Express Scribe*.⁴

In some cases, participants had the ability to fill in gaps within the literature and expand upon *best practice* techniques. Furthermore, the key informant interviews were utilized to elicit or clarify information on existing programs, policies, or legislation related to the abuse of older adults by answering questions such as, *what is the purpose of* (*program/policy/legislation*), *what have been the outcomes?* Moreover, participants were able to discuss any strengths or weaknesses of abuse toward older adults within the

⁴ This procedure remained the same for all but one key informant interview. One participant was unable to partake in a telephone interview, but indicated a desire to participate. A consent form was emailed to the individual where it was signed and returned by fax to the researchers. Specific questions were then emailed and the participants answers returned by email to the researchers.

domain of family violence, for example, would you please clarify/elaborate on the role that the (program/policy/legislation) plays in addressing issues in family violence?

1.5.2 *Analysis*.

The information gathered from the key informants informed this report and for the most part was used to illicit different or best practice approaches.

1.6 *Methodological Challenges*

Throughout this research, language emerged as a challenge in terms of searching, discussing, and writing. Various jurisdictions, provinces, and individuals use different terminology to classify or depict the aging population. The resultant lack of consensus and consistency with the use of terms older adult, senior, and elder posed challenges in the research. The term elder, can be perceived to have a negative connotation as it suggests frailty, weakness, and dependence. On the other hand, for some cultural groups, the term has significance. For example, within Aboriginal communities, an elder is someone who has earned respect through years of experience.

Some provincial governments and community organizations are initiating change in their use of language, by using the term seniors or older adults rather than elder. However, the term senior implies some arbitrary age criteria to which not all would agree. Common language would help to clarify and maximize research potential. Furthermore, changes in language need to be considered as a way to negate negative stereotypes about the aging population.

Another methodological challenge pertained to the inclusion of select populations; namely, the voices of Aboriginal and gay men and lesbians. Attempts were made to have their perspectives included in the focus groups. Indigenous groups were briefly mentioned throughout the focus groups in this study and were noted as a focus within this body of research that is largely underdeveloped. Literature searches found limited academic and government material addressing the phenomenon of abuse within Aboriginal cultural communities.

Similarly, existing research on gay men and lesbian s and family violence/abuse is limited due to social stigmatizations they face. Given the rise in the aging population, one can presume there is also an increase in the older gay and lesbian populations and their experiences should not be neglected.

Otherwise, the parameters of this research should be mentioned. Because of the research's focus on family violence, this research did not include institutional settings. The specific research examined abuse and neglect as it occurs within relationships of the family. While abuse and the experiences of older adults do occur within institutions and should not be ignored, the scope of this research was not extended to this care setting.

Further, the scope of this research was the family as a whole and did not single any particular form of family violence. Some literature on intimate partner violence and child abuse was included but not the central point of interest. This may limit the research if one wishes to inquire further about child abuse and intimate partner violence as separate areas of interest and the feasibility of applying lessons from these to the abuse of older adults.

1.7 Value Added Regarding Primary Research

This project's methodology included focus groups with representatives from community and government with expertise and experience within the realm of family violence generally and/or older adult abuse specifically. While several networks and collaborations are under way within Nova Scotia, these enabled dialogue amongst several organizations for the first time. Participants benefited from learning about issues and challenges faced by others, current initiatives, and potential for further collaborations.

1.8 Organization of the Report

Following this overview section, Section 2 provides a synthesis of what we know regarding family violence in terms of theoretical frameworks, naming, risk factors, measurement, reporting, assessment, and interventions. Throughout this section, strengths and limitations of existing knowledge are noted. Section 3 provides a synthesis of the similar categories with respect to the field of older adult abuse and strengths and limitations of existing knowledge are noted. Both Section 2 and Section 3 draw on the published and unpublished literature as well as messages from the primary sources of key informants and focus group participants. Following the presentation of this information, Section 4 proposes a framework that offers increased breadth and depth to advancing the work on the topic of abuse to older adults. Finally, recommendations are offered to inform the development of a research agenda on of older adult abuse.

2. What We Know About Family Violence

2.1 Overview

Family violence is a consistent and widespread social problem within Canada that has gained public attention since the early to mid 70s. The scope of family violence can include violence between partners whether legally married or not, between parents and children or youth, between siblings, or other relations. For the purpose of this section, family violence does not include those situations involving older adults (for that discussion, see Section 3).

Prevalence and incidence rates on family violence vary depending on definitions used and data for some populations are more difficult to obtain than others. Statistics Canada data suggest that seven percent of Canadians 15 years of age and older either in a current or previous marital or common-law union in 2004 experienced spousal violence in the previous 5 years. This estimate was unchanged from the seven percent reported in the 1999 General Social Survey (Statistics Canada, 2005). Concerning differences in rates of spousal violence for women and men between 1999 and 2004 there was no significant change in the level of spousal violence against men (seven to six percent) while for women there was a slight statistically significant decline from eight to seven percent. Data on violence between other types of relations, including parent and child, are more challenging to elicit. In 2003, children and youth under the age of 18 represented 21% of Canada's population and accounted for 25% of all victims of physical and sexual assaults reported to police. Among the approximately 37,300 assaults reported by the 122 police services in 2003, physical assaults against children and youth outnumbered sexual assaults by three to one (approximately 28,000 compared to 9,300 respectively) (Statistics Canada, 2005).

Various causes and consequences are offered when discussing family violence. As well, depending on the scope of violence and definitional criteria, different responses have been employed. This section examines in greater depth the existing knowledge and practice in the field of family violence.

2.2 Family Violence: A Life Span Approach

Different forms of family violence have historically had their own literature and focus (Walsh et al., 2007). Researchers and practitioners have examined specific abusive phenomena, such as child abuse or intimate partner violence. While this has yielded indepth knowledge about the incidence and prevalence of these particular forms, the risk and protective factors, and prevention and intervention strategies, advancement in the field of family violence is hampered by the fragmentation and tensions that result, a contention supported by focus group participants. To counter this, a growing number of investigators are interested in the interrelationships among various forms of family violence and in understanding it in a unified way.

Some propose the lifespan model as an integrative framework (Walsh et al., 2007). Evidence suggests that forms of family violence across the lifespan are not mutually exclusive but may occur simultaneously within the same family. Moreover, one form of family violence may place an individual at risk for further violence at subsequent stages in the lifespan (Kemp, 1998). Individuals participating in a study exploring the interconnections among various forms of violence reported that abuse that occurs in the past continues throughout the lifespan in a pattern described as a *vicious circle* (Walsh et al., 2007). It is then clear that violent behaviours overlap and intersect in complex ways throughout the lifespan and across generations.

Definitional and conceptual synergies are evident as one begins to analyze literature focused on naming various forms of family violence. Intimate partner violence, child abuse, sibling and parent abuse, as well as older adult abuse are all described as patterns of behaviour potentially comprising of physical, psychological, or sexual abuse. Economic or financial abuse is another manifestation common to senior abuse and intimate partner violence in particular and entails the involuntary control of financial resources including withholding money for basic necessities. Physical abuse is defined as the non-accidental and wilful infliction of pain or injury on another (Duffy & Momirov, 1997). Sexual abuse is any form of sexual activity with a person without the consent of that person (Kemp, 1998). Any behaviour intended to control, humiliate, intimidate, instil fear, or diminish a person's self worth is considered psychologically abusive (Mignon, Larson, & Holmes, 2002).

2.3 Socio-political Context

In practice, where we intervene in society, depends on how we frame a problem and where we perceive that problem to be.

Family violence began to emerge as a focus of research and practice in the 1970s through the work of the contemporary women's movement. Advocates within this movement worked to break the silence and promote awareness of the pervasiveness of violence against women and children (Duffy & Momirov, 1997). Public awareness and educational campaigns during the women's liberation movement fostered public dialogue on issues such as wife battering and child abuse and helped to position a place for family violence within the public agenda.

What little statistics existed prior to the 1970s indicated low incidence of family violence despite the widespread existence of neglect, abuse, and violence within families (Gelles, 1980). The low incidence rates had little to do with the prevalence of violence within families and more to do with societal perceptions of family shaped by overarching ideologies of patriarchy and familialism.

Families and communities are profoundly affected by overarching ideologies within society. In particular, dominant ideologies of familialism and paternalism have structured family values in Canada, while the emergence of capitalism has reinforced cultural values of individualism and independence. Canadian public institutions have been founded and continue to operate on ideologies such as familialism and capitalism. Unfortunately, ideologies of capitalism, patriarchy, and familialism operate together in a manner that increases stress on families. They also contribute to the marginalization and social isolation of segments of the Canadian population, such as women, children, seniors, indigenous peoples, immigrants, gay men or lesbians. Familialism, which has long been

integrated within our culture in Canada, promotes the traditional notion of family as a "safe haven" (Duffy & Momirov, 1997, p. 4). Family, from this ideology, is viewed as a supportive institution that provides a positive home environment in which members receive unconditional love, support, and protection. Unfortunately, statistics have generally shown that for many people home is often an unsafe place to be. A 2005-2006 Transition Home Survey, conducted biennially as a part of the Canadian Federal Government's *Family Violence Initiative* indicates that 74% (2,912) of women experienced abuse prior to them coming to the shelter (Statistics Canada, 2007). Furthermore, 66% were escaping from psychological abuse, 55% physical abuse, 41% threats, 37% financial abuse, 28% harassment, and 23% sexual abuse. Two-thirds of the 74% reporting abuse to shelter officials named their spouse or partner as the abuser and 13% was a former spouse or partner.

The myth of family as a safe haven has continued to be a major barrier to public intervention. The reality of violence within the family does not fit the idealized version of family. This often creates another oppressive layer for persons experiencing abuse as, upon seeking help, they may not be believed (Health Canada, 1993); their stories and the realities of their everyday lives are, in essence, denied. The realities of everyday life are often cloaked within the idealized notions of family (Smith, 1987). Silence is both fostered and enforced through fear of violence and/or further isolation.

Another facet of familialism is adherence to paternalistic family values. A family conforming to these structures is often portrayed as the male or father being the figurehead with the financially-dependant wife or mother and their children. Both men and women are socialized into and expected to conform to specific gender roles. Men are expected to be the breadwinners and are strongly socialized into hiding emotions/behaviours that might be perceived as weaknesses. They are expected to maintain order within the family unit and to discipline family members who are perceived to threaten traditional family values. Women are expected to take a passive role and ensure that all domestic and caregiving needs are met. These roles have historically been integrated within the pattern of our society through early religious and historic laws that bestowed upon men the legal right to physically control and punish women and children within their family (Duffy & Momirov, 1997; Hutchings & Hutchings, 1988) and continue to be perpetuated today through dominant social ideologies. Blackstone's common law, a widely referenced old English law, not only recognized the right of husbands to physically dominate their wife, but also named them the legal owner of her property (Duffy & Momirov, 1997). Women and children had few rights as persons and were expected to be subservient to men and the institution of family.

Familialism also fosters the notion of family as a private institution (Harbison & Morrow, 1998; Kelly, 2003). Family members are expected to deal with issues privately within the family and to present a united public front. Many professionals continue to view problem behaviours and/or patterns within the family as individual issues or issues that should be handled privately within the family (Harbison et al., 1995); therefore, they are often reluctant or slow to intervene.

Capitalism within a liberal democracy fosters individualism and competition for scarce resources such as goods and services (Duffy & Momirov, 1997). Individuals socialized in

such a society develop feelings of deep-rooted entitlement. Family members not only compete for scarce resources provided through family income, but also love, affection, and attention (Duffy & Momirov, 1997). Conflict and stress within the family arises, often manifesting in the erosion of family attachments and/or the development of problem behaviour such as family violence.

Often, men within a competitive capitalistic society feel powerless. This perceived powerlessness is then projected onto family relationships and often exercised through domination over family members (Javed & Gerrard, 2006). Family members who are perceived to question *order* are controlled as the male figurehead deems fit. The perception of loss of control is often reinforced through changing family dynamics and the increased emergence of women within the workforce. Intimate partner violence is often a manifestation of this perception and a direct attempt at both maintaining and enforcing power over women both within the home and within society (Duffy & Momirov, 1997; Yllö, 2005).

In order to understand and appropriately address issues in family violence, we must begin with a clear understanding of family relationships and the experiences of everyday life and how public institutions and dominant ideologies shape these experiences.

2.4 Theoretical Frameworks

A multitude of theoretical perspectives on family violence have been developed. Advocates of diverse perspectives disagree on many points; however, more than one theory can be relevant to any given case of family violence. Three of the main categories of theoretical approaches are psychological, sociological, and structural/political.

2.4.1 Psychological.

Psychological approaches seek to explain family violence through exploring factors that might cause abusers to behave in what is perceived to be deviant or abnormal ways. Explanations within psychological approaches tend to focus on personality disorders and/or mental illness (Gill, 2006). Childhood trauma within this approach is often associated with mental illness.

Analysts adhering to these individual pathology approaches also seek to explain why women do not leave abusive relationships. Explanations are sought through exploring women's personality traits and psychosocial responses to their environment, such as dependency needs, low self esteem, and masochistic tendencies (Duffy & Momirov, 1997). Social learning theories such as learned helplessness of victims and learned violent behaviours of abusers have also been employed within the psychological context of explaining family violence.

Individual counselling and therapy are thought to be key interventions in helping to foster alternative behaviour for both persons experiencing violence and those perpetrating it.

One feminist criticism of the psychological theories is that associating individual medical and psychological factors to violent behaviour often leads to an, us versus them attitude

regarding family violence. This tendency can compartmentalize the issue as primarily relevant only to those with psychological problems thereby exacerbating the isolation and humiliation of those directly affected by it. Moreover, this narrow conceptualization does not account for the ways in which violence is perpetuated and sustained through and by institutions within our society. Sociologists also argue that psychological explanations do not account for situational factors that families may face that foster stress and conflict. More specifically, criticisms have been offered in relation to sampling bias resulting in an incomplete understanding of the issues. For example, Straus (1980) argues that mental illness among abusers is no higher than that among the general population and Gelles (1979, 1983) notes that violence is not limited to persons living with mental health issues.

Although individual pathological factors were the basis for the rationalization of family violence for many years; more recent analyses favour sociological and feminist theories.

2.4.2 Sociological.

Social theories explaining family violence focus on socialization, particularly the socialized responses to situational circumstances thought to provoke violent behaviour.

Recognizing that family functioning is affected by situational factors, such as socioeconomic stressors, sociologists have investigated the impact that changes within the environment have on families and their coping mechanisms. Violence, within this perspective, is seen as one approach that some family members may utilize in an attempt to cope with increased stress and/or change (Duffy & Momirov, 1997).

From a social learning perspective, exposure to violence as a child is thought to increase risk of either becoming a perpetrator or victim of violence as an adult (Gill, 2006). Social learning theorists cite examples of studies where pedophiles were shown to have a childhood history of sexual abuse. However, some social theorists argue that past experience of abuse cannot be identified as a causal factor, warning many experiences and/or sets of factors can contribute to both positive and negative behavioural outcomes (Gelles, 1983; Straus, 1983). Sex role theory, a social learning perspective often employed by sociologists, suggests that men and women are socialized into gender roles that reinforce an unequal balance of power between men and women in society. Finkelhor (1983) notes the link between power differentiation and violence and the need for further research on power dynamics.

General systems theorists consider the ways in which members of a "system", such as a family, interact through relations of interdependence characterized by clear and unambiguous boundaries both within the family and between the family and external environments. Violence, from a systems perspective, may emerge when such relations cannot be maintained resulting in disequilibrium (Gill, 2006; Murray, 2006). While this analysis is useful in that it extends the focus beyond micro-level interaction to the transactions that occur with other levels of the environment, the family and not necessarily the individual, is the unit of analysis. The implications of this for research on any aspect of family violence are meaningful. Individual experience is potentially obscured through reliance on this framework meaning that those considered to be

vulnerable, such as women, may not emerge as individuals with a separate story distinct from their family experience (Murray, 2006).

2.4.3 Structural/political.

Structural/political theorists examine the manner in which public institutions reproduce and reinforce ideologies that foster power imbalances within society and male dominance over women and children (Health and Welfare Canada, 1993).

Feminist structural analysts focus on women's experiences within abusive relationships. They investigate the oppression and isolation of women within society and point to patriarchy as the dominant ideology that continues to reinforce systemic discrimination towards women (Gill, 2006).

Intervention models within feminist and structural/political theory tend to focus on acknowledging and understanding personal experiences of abuse in an attempt to deconstruct dominant ideologies and foster social transformation. This approach is more inclusive and counters the individual perspectives that have been offered.

2.4.4 *Toward an ecological perspective.*

The field of family violence has been enriched with diverse scholarship and meaningful and dedicated practice both on the political and social frontlines. Numerous theoretical frameworks offer unique perspectives and insights that have informed specialized knowledge concerning the different forms of family violence. The robust level of public debate within the field is a positive indication of change; however, it is clear that something more is needed to transform current understandings of family and of violence.

Historically, work within the field has been segmented along theoretical lines, as well as specialization within the different types or forms of family violence. Although this has cultivated in-depth understanding within the various domains of family violence, it is critical to recognize that families, across their lifespan, often simultaneously experience multiple types of family violence (Daro, Edleson, & Pinderhughes, 2004). Social learning theories indicate that the experience of one form of violence will often foster another (Tolan, Gorman-Smith, & Henry, 2006).

Limited public resources have fostered competition amongst the various domains of family violence. As a result much of the family violence scholarship and work is wrought with debate attempting to reinforce individual perspectives (Tolan et al., 2006). Opportunities for cooperation, collaboration and shared learning are lost and the domains continue to operate in isolation (Daro et al., 2004). It is imperative for those within the field to begin to place focus on the common features inherent within the experience of family violence, as well as common factors that foster violence and factors that assist in preventing it (Daro et al., 2004).

Ecological conceptualizations of family violence have recently gained interest within the field (Daro et al., 2004; Jouriles, McDonald, Norwood, & Ezell, 2001; Little & Kantor, 2002). An ecological perspective suggests that the family's interactions encompass the

transactions that occur between four levels of environment (Bronfenbrenner, 1979); the microsystem (family), the mesosystem (family's social network), the exosystem (social support networks within the community), and the macrosystem (society and dominant ideology) (Connard & Novick, 1996; Schiamberg & Gans, 1999). The support networks within these environments can either facilitate or obstruct healthy human development and the positive functioning of a family (Connard & Novick, 1996).

Frameworks based on ecological theory have the potential to exemplify the individual, family, community, and societal risk factors that interact to foster violence within the family (Little & Kantor, 2002).

2.5 Naming

Language is not neutral. The act of utilizing specific terminology when referring to an issue has very real socioeconomic and political outcomes.

One area of major contention within the field of family violence is how to appropriately incorporate gender inequalities in experiences of violence. Many feel that the term *family violence* is misleading; arguing that women constitute the majority of those who experience violence within the family and the language, therefore, should reflect the gendered nature of the problem (Duffy & Momirov, 1997; Tolan et al., 2006).

The terms wife abuse or wife battering are now considered outdated within the field of family violence, as they restrict their relevance to that of marital relationships creating a barrier to understandings of violence occurring within common-law or dating relationships. However, proponents of a gendered definition advocate for terms such as violence against women or male violence. One viewpoint is that referring to violence against women under the term family violence masks the violence the women encounter outside the family and intimate relationships (Health Canada, 1993). Others, however, argue that a gendered approach to defining family violence is too narrow a definition and negates the experience of family members of both genders who also experience violence, such as children and seniors.

Intimate partner violence (IPV) is a term widely used when referring to the violence that occurs between intimate partners. Many who use the term IPV rather than wife abuse, domestic violence, or women battering do so to acknowledge that everyone in an intimate partner relationship, whether married, common-law, dating or separated, is at-risk for experiencing violence. In fact, studies have indicated that women within common-law relationships are more at risk of violence (Duffy & Momirov, 1997). Although it is widely acknowledged that both men and women are equally capable of violence, it is generally recognized that the pattern of abuse in society is that of males perpetuating violence against female partners. In addition, studies have also indicated that women who do become violent are often doing so to protect themselves (DeKeseredy, 2006; Duffy & Momirov, 1997).

Furthermore, theorists have argued that the language of *victimization* with respect to family violence needs to change (Jones, 1996). For example, referring to women as victims of abuse places them in a passive role within situations of family violence, when,

in fact, this is often not the everyday experience of women living within relationships of IPV. Women experiencing IPV continuously make strategic decisions in order to survive the violence and/or to protect their children (Comack, 1996). In addition, women, throughout history, have been on the frontlines bringing issues of family violence to the attention of the public, working in the field to protect women and children, and researching and advocating for social change (Health Canada, 1993). Jones (1996) argues that the language of victimization places the focus on the persons who have experienced the abuse and disguises the perpetrators of it.

2.6 Risk Factors

Although each form and circumstance of family violence is unique, common risk factors for family violence have been identified at multiple levels, including individual, family, community and societal levels.

2.6.1 *Individual*.

Mental Health:

Research has shown that perpetrators of family violence are more likely to have mental health and substance abuse problems (Dutton & Bodnarchuk, 2005).

Alcohol Abuse:

There is a great deal of contention within the literature concerning the abuse of alcohol as a possible risk factor for family violence, particularly physical aggression and sexual assault related to intimate partner violence. Some studies have indicated that the consumption of alcohol may increase the likelihood of violence within the family (Anetzberger, Korbin, & Austin, 1994; Rodriguez, Lasch, Chandra, & Lee, 2001; Thompson & Kingree, 2006). Flanzer (2005) for example argues that alcohol and other drugs are key causal instruments of family violence. He contends that the effects of alcohol can lead to violent behaviour and alteration of brain functioning over time. Furthermore, he argues that alcohol abuse may function as a *rationalization for violence* and may in fact stunt and/or skew healthy family development. Gelles and Cavanaugh (2005), however, dispute alcohol as a cause of family violence. They contend that while alcohol may be associated with family violence, many individual, social, and cultural factors need to be considered along with alcohol and/or substance use.

Gender:

Some researchers and practitioners have postulated that women are more likely than men to experience abuse (National Clearinghouse on Family Violence, 2004); while others have indicated that men are equally at risk for abuse. Furthermore, some research has found that men and women may differ in their risk levels for different forms of abuse. Campbell (1993) suggests that women's aggression is the "failure of self-control, while for men it is the imposing of control over others" (p.1). While there is disagreement on the manner in which gender affects a person's risk for abuse, it is clear that both genders have the potential to experience abuse (Kosberg & Nahmiash, 1996).

2.6.2 *Family*.

Changing Roles within Families:

Changing roles across the life course of a family and changes within the broader contexts of society may lead to shifts in the balance of power within families (Gold & Gwyther, 1989), as well as new, modified, and/or an increase in or decrease of responsibilities.

Living Conditions:

The conditions in which families are living may be associated with increased stress and intra-family conflict, in particular, conditions of overcrowding (WHO, 2002).

Presence of Another form of Family Abuse & History of Abuse:

Research has demonstrated that children within families who experience IPV are more likely to be neglected, mistreated or abused (Mohr & Tulman, 2000). For example, poor parenting skills have been found to be associated with IPV (Little & Kantor, 2002). In addition, children who witness and/or experience violence with the family are more likely to become violent adults (Mohr & Tulman, 2000). Exposure to violence whether in the family or within broader culture may also increase the likelihood of a child accepting and/or tolerating family violence later in life.

2.6.3 *Community and societal factors.*

Dominant ideologies within our society, such as those discussed earlier - familialism, patriarchy, and capitalism, pervade our cultural, religious and public institutions, in addition to our experiences within everyday life. These ideologies influence the manner in which we understand, frame and respond to issues within society, such as family violence. Young (1990) notes that the injustices that some groups suffer are "consequences of often unconscious assumptions and reactions of well-meaning people in ordinary interactions, media and cultural stereotypes, and structural features of bureaucratic hierarchies and market mechanisms" (p. 41). She further explains the *five faces of oppression*; exploitation, marginalization, powerlessness, cultural imperialism, and violence each of which foster isolation for many groups (Young, 1990).

Persons who are isolated within society are at increased risk of family violence. Women, children, seniors, gay men, lesbians, visible minorities, and immigrants all experience social isolation and barriers to full participation in society. The experience of each individual and group is always unique; however, all face social exclusion due in large part to dominant ideologies fostered through culture, religion, public institutions, and individuals within everyday life. Inadequate social support and community resources have been highlighted as both risk factors and consequences of abuse within family violence literature (Anooshian, 2005; National Clearinghouse on Family Violence, 2003; Wolf, Daichman, & Bennett, 2002).

Within the project's focus groups, one community service provider discussed the marginalization that immigrant women face within society. This individual indicated that many immigrant women that come to the organization for support have large families and depend completely on their husbands. The individual also discussed the language and education barriers that immigrant women face when seeking employment.

Researcher Javed (2006), in partnership with Gerrard (2006) highlight the pervasive nature of social exclusion that immigrant and visible minority women face on a daily basis and how this plays a significant role in fostering and enforcing their silence. They discuss how exclusion from society through racism enforces the feelings of reliance that immigrant and visible minority women have on their cultural communities. This feeling of dependence may intensify their fear of being abandoned by their cultural community and/or fear of exposing their culture to further racism by voicing their experiences of family violence (Javed & Gerrard, 2006). Additionally, Javed and Gerrard (2006) discuss the manner in which immigrant men and women tend to diverge in their strategies for coping with racism and marginalization. They indicate that men tend to look to their home and their cultural community to regain their feeling of power, whereas women are expected to take a supportive role. If women fail to do this, they not only fear punishment at home, but also from their cultural community (Javed & Gerrard, 2006).

Isolation can decrease a person's ability to seek help or report abuse. Many women and children living in the reality of IPV often find themselves physically, as well as emotionally, isolated. Within the focus groups, community service providers highlighted many examples from within their organizations of women who were unable to seek help because they did not have access to a telephone or alternative transportation.

Lack of appropriate options for community supports, health and social programs, income, and housing can place a tremendous amount of stress on families and increase the likelihood of intra-family conflict.

2.7 Measuring Family Violence

Another significant challenge highlighted within the family violence literature is the complexity of determining what behaviours constitute violence and when do they become problematic. What acts or patterns of violence do we as a society label as problematic and how do we determine the timing and nature of intervention? Much of the family violence literature is riddled with debates concerning where the focus should be. Despite a growing consensus with respect to including non-physical acts such as emotional/psychological abuse and material/financial abuse as forms of family violence, little consensus has been reached in terms of intervention.

One viewpoint is that only behaviours or patterns of behaviour with clear harmful impacts, such as physical abuse, should be included in a definition of family violence (Barnett, Miller-Perrin, & Perrin, 2005; Tolan et al., 2006). Proponents of this perspective argue that including *milder* forms of violence in a definition of family violence may create ambiguity in terms of legal intervention and may even de-emphasize more severe forms of violence (Tolan et al., 2006). This viewpoint is often advanced by proponents advocating for the criminalizing of violent behaviour. Moreover, legitimized and socially accepted violent behaviour within society, such as violence between siblings and some forms of corporal punishment, also pose a dilemma in determining when behaviour becomes problematic (Tolan et al., 2006).

The general consensus among researchers and practitioners is that physical violence should not be considered a separate act; rather it is a part of a multi-behavioural definition of abuse (Jouriles et al., 2001). Proponents of this viewpoint argue for a broader and more inclusive definition of family violence that includes all acts of physical, emotional/psychological, and material/financial neglect and abuse (Barnett et al., 2005). They feel that physical violence alone is too narrow a focus and that other forms and patterns of violence have equally harmful effects. However, those opposed to a broad definition of family violence argue that a narrower definition of family violence would ease police intervention and follow through within our systems of justice.

2.8 Reporting

There are many dynamics that come into play that determine whether or not individual cases of family violence are reported. Because family violence often occurs in a private home setting, there are very few, if any, witnesses.

Individuals experiencing family violence may fear repercussions for themselves or to their loved ones for disclosing the behaviour. As noted by participants in the focus groups, apprehension regarding interventions involving public institutions such as the justice system and/or community services may also create reluctance to disclose violence. For example, mothers who experience intimate partner violence may choose to stay within the relationship rather than lose their children. Children and seniors facing abuse may fear being removed from their home and placed in alternative settings.

Due to widespread idealized notions of family and the resulting social stigmas attached to family violence, individuals experiencing family violence may feel an intense sense of shame and humiliation. They may perceive their family to be abnormal or deviant, as their experience does not conform to their perception of the everyday life of "normal" families within their community. They may also feel that they have failed to conform to their socialized gendered roles within the family.

In some cases, individuals may have had prior negative experiences with reporting abuse. For example, individuals seeking help with intimate partner violence often experience situations where they are encouraged by those within their social network or community to try and handle the situation privately. They may also be blamed for the violence and encouraged to attempt to placate the abuser or be more cooperative within the relationship. In some cases, persons, especially women, experiencing intimate partner violence may not be believed as this experience would not be compliant with the idealized version of family.

All too often, children are both the victims of and witnesses to family violence. Children often do not have the ability to distinguish between problematic and unproblematic behaviour, especially if the behaviour is being displayed by a parent. They may be socialized within the family environment to believe that violence is acceptable and even justifiable and necessary at times. Even if children perceive violence within their family to be problematic, children may not have the skill sets required to voice their experiences in a manner that could be successfully interpreted by those around them. They often rely on the adults in their family to provide a public voice for them.

Older adults who experience violence may face barriers in the form of cognitive impairments related to such health issues as dementia or Alzheimer's disease. These individuals, who are relying on caregiver support, may not be fully aware of the abuse or if they are may also fear abandonment. These issues will be discussed further in section 3.5.

2.9 Screening and Assessment

The often hidden character of family violence gives rise to the importance of appropriate screening and assessment instruments.

Data collection instruments are designed with specific goals and objectives in mind with respect to what is being measured and why. The purpose of data collection is determined largely by the situation. Much of the data that exists on family violence is in the form of official statistics, such as crime reports, medical case reports, service utilization reports, self reports often contain what Duffy and Momirov (1997) refer to as a "dark figure" (p. 11). This is an ambiguous figure that is comprised of all the information that could not be captured due to limited data collection techniques or objectives. For example, the accuracy of population surveys is difficult to determine. They are usually conducted by telephone and respondents may be reluctant to provide an accurate or full account of their experiences (Duffy & Momirov, 1997).

Police, clinicians, social workers and researchers have a diversity of needs and resources. They often work from different frameworks that conceptualize violence in diverse ways. While law enforcement officials may be interested in collecting data regarding legally defined violence, often limited to physical assault, a social and/or health researcher may have an interest in collecting data with a comprehensive definition of violence in mind. In addition, while clinicians and law enforcement officials may be more interested in screening for violence, researchers and adult protection workers may have an acute interest in assessing violence (Fulmer, Guadagno, Dyer, & Connolly, 2004).

As discussed earlier, there is no one standardized definition of violence. Therefore, a major challenge with many screening and assessment tools is the necessity of making determinations of what constitutes problematic behaviour. Assessment instruments that specifically use measurement scales are limited as they are based on a set of predetermined responses (Fulmer et al., 2004). In the absence of well-defined criteria for each response, it is likely that results will be biased.

One widely adopted instrument within the field has been the Conflict Tactics Scale (CTS) (Straus, 1979). The CTS, an 18-item survey, measures the interpersonal conflict tactics of both men and women. Reasoning, verbal aggression, and physical violence is ranked on a continuum of least to most severe (DeKeseredy & Schwartz, 1998). The CTS has proven to be a reliable measure in terms of what it was developed to measure; however, it has not been received without criticism. One criticism of the CTS is the assumption, clearly delineated through the ranking system, that certain forms of violence, such as psychological abuse, are less severe than others (Kelly, 1987). Another criticism is that the CTS situates violence in the context of conflict, thereby ignoring the violence that

often occurs through deliberate and often planned attempts to control or dominate (DeKeseredy & Schwartz, 1998).

Instruments with predetermined notions of what constitutes violence may limit the quality of data that is collected. Open-ended qualitative surveys may capture problematic behaviours that may not be defined as violent within quantitative instruments (Waltermaurer, 2005) and may provide indications of the contexts, meanings and motives embedded within the experience of violence. First-voice accounts have the potential to reveal the full experience of family violence including the deep feelings of fear, shame and humiliation that persons often suffer. However, self reports and open-ended surveys also present challenges, as they are dependant on the respondent's willingness to provide accurate and full descriptions, as well as their recollection and perception of the experience(s).

Another bias within some instruments is the criteria established to screen participation. Systems theorists may argue that a comprehensive understanding of family violence could not result from an analysis of data exclusively from these instruments, that, family relationships are based on the concept of reciprocity, therefore individual behaviours are linked. Similarly, enrolment criteria may limit the information that may be collected by the instrument. For example, earlier IPV instruments limited potential perpetrators to that of spouse (Gelles, 1974; Hudson & McIntosh, 1981; Lewis, 1985). These instruments would have overlooked IPV experienced within dating and other intimate relationships.

Many of the instruments are conducted exclusively in English. Language barriers prevent immigrants, visible minorities, and many indigenous peoples who do not speak English as a first language from fully participating in screening and assessment surveys. Women immigrants may also face an increased pressure to maintain silence. Not only do they face the challenge of familialism, but many also feel the weight of their community. They fear social isolation, as well as fostering stereotypes in relation to their culture (Javed & Gerrard, 2006).

Due to the inherent biases within each data collection instrument, it is important for practitioners and analysts to understand the history and purpose behind them in order to make the most suitable choice of instrument and to understand and interpret findings appropriately. Unfortunately, data collection instruments are often utilized outside of the context for which they were designed and findings are generalized too quickly.

2.10 Interventions

2.10.1 *Programs and services.*

Through this research a number of innovative family and seniors programs offered throughout Canada have been identified. In particular, focus group participants and key informant consultants shared their knowledge of successful programs offered within their communities that assist with the prevention, intervention, and treatment of family

violence. A multitude of programs were highlighted at community, municipal, provincial, and federal levels.⁵

Common themes began to emerge through participant dialogue on success stories within family violence programs. In particular, participants discussed the importance of coalitions, the coordination of and sharing resources, approaching family violence from a lifespan model that empowers individuals and fosters citizen engagement. One key informant also observed that it is community organizations that have attempted to stop the cycle of abuse within families, not government. Participants discussed the importance of fostering political champions for holistic family violence programs.

A review of family violence literature reinforced these observations. In particular, participants in a research study on domestic violence by Kelly (2003) mirrored many observations of participants within this research on family violence. Kelly (2003) identified the creation of momentum around domestic violence issues as a prevailing theme within her research. Participants of the study felt that momentum, as well as long-term sustainability could be achieved through collaborative endeavours. Another positive aspect of partnerships identified within Kelly's (2003) study was the capacity of organizations operating within a collaborative model to coordinate fractionalized services.

The *Premier's Action Committee on Family Violence Prevention*, another innovative program which was appointed by the Premier of Prince Edward Island in 1995, is an example of a collaborative and sustainable approach to community prevention and intervention. This program is also based on a community development model. The Committee was tasked with coordinating the provincial Family Violence Prevention Strategy and has been recognized by representatives of *Advisory Council on the Status of Women* as a best practice.

One key informant discussed the successful impact that the Committee has been having within communities in Prince Edward Island. Many strengths of this Committee were discussed including the collaborative structure of the Committee and strong commitment to inclusiveness, education, and collaboration. Furthermore, the presence of key political champions, and an ongoing commitment to consciousness raising and community engagement, was also outlined as valuable attribute of the Committee's work.

The Committee is comprised of 20 community stakeholders and seven government representatives. The diverse nature of the Committee has continued to foster social learning and a sense of collective responsibility. The administrative committee, a subcommittee, was formed and acted as the driving force behind the program. A representative from core government sectors, including the attorney general, education, women's secretariat, and health and social services, participated in the administrative committee; alongside representatives from two primary funding community groups, the rape crisis centre and the transition house association.

⁵ This research was not intended to review/research all programs but rather draw on the lessons learned from a select few.

One challenge faced by the Committee has been maintaining a balance of commitment to all sectors of family violence in the face of competing agendas. The Committee achieves this by remaining very conscious and very deliberate in its commitment to the vision statement:

A society where all individuals are safe, respected and valued; where any form of violence is unacceptable; and where children, women, and men have opportunities to reach their full potential and contribute to the overall well-being of families and communities.

The Committee felt that an education component was important to include in each meeting. Through this initiative, members had the opportunity to learn from a diverse range of guest speakers within the community, experts, and first voice accounts of experiences with family violence.

Another key strength of the action committee is the presence of political champions, in particular, the Premier and Lieutenant Governor of Prince Edward Island. Through their championing a sense of credibility and long-term sustainability was fostered.

The commitment of the committee members to raise consciousness about family violence, as well as public education and engagement has fostered an overall sense of familiarity throughout Prince Edward Island. One key informant indicated that citizens now equate purple ribbons on city hall with family violence prevention and the Premier's Action Committee. Furthermore, residents often approach members of the committee to thank them for their good work.

Another example of an innovative approach to family violence programming is the *Family Services Association of Toronto* (FSAT). The FSAT is a multi-service organization providing counselling support to individuals, families, couples, and groups. FSAT is structured in a manner that allows for maximum capacity to coordinate a large number of multi-level services under a number of different portfolios, including, but not limited to, *Violence Against Women* (VAW), *Families in Transition*, *LGBT Parenting Network*, *Community and Neighbourhood Development*, *Lesbian and Gay Community Counselling*, and *Seniors and Caregivers Support Services*. Under the VAW portfolio, FSAT offers an educational workshop for Somali-speaking women. The workshop offers women the opportunity to share their experiences and viewpoints. Workshops involved intergenerational conflict (parent and youth), abuse, nutrition, stress management, and anger management.

FSAT engages in community development and advocacy work at municipal, provincial and national levels. An example of their advocacy work is their coordination of Campaign 2000, a national public education movement to build Canadian awareness and support for the 1989 all-party House of Commons resolution to end child poverty.

One theme that emerged time and time again throughout focus group and key informant consultations was the need for further programs based on a lifespan model. In particular, participants discussed the importance of early intervention programs for child witnesses and victims of abuse. One such program, offered by Alice Housing in Nova Scotia, a

shelter for women leaving violent family circumstances, called *Healing the Bruises* was discussed as a best practice. Healing the Bruises, the only program of its kind in Nova Scotia, offers a consistent holistic and non-punitive way of working with interventions. The program addresses family violence throughout lifespan, including seniors, in context of their child, their mother, and their community. The program arose out of a gap in services for children that had been identified by Alice Housing.

Youth programs offered through Healing the Bruises include everything from modified art therapy, play therapy, and recreational therapy to youth discussion groups. *Straight Talk*, a youth discussion group, offers youth the opportunity for you to determine and discuss issues that are relevant to them in a safe environment. This enabled mothers to attend parenting support groups, as well as individual and group counselling.

Through Healing the Bruises, children are able to connect with multiple community supports. Children learn about volunteering within the community and are often exposed to community resources in which they could become involved. One focus group participant described how children were supported through this program continue to thrive. Some successes involve children learning to express themselves in a positive manner within the home, improved performance in school, and discontinuation of self-harm behaviours.

2.10.2 Policy and legislation.

At the federal level there are provisions within the Criminal Code that pertain to family violence. "These include physical or sexual assaults, intimidation and harassment as well as crimes such as theft of property, fraud, or theft by power of attorney" (CNPEA, 2006, p. 4). At the provincial level, the legislative approach to family violence varies across the country. In almost all provinces or territories, there is specific legislation for family violence (i.e., Nova Scotia, Newfoundland, Nunavut, Prince Edward Island, Ontario, Alberta, Saskatchewan, Manitoba, Northwest Territories, Yukon) (CNPEA, 2006; Hall 2008), while in others it is embedded in legislation related to family services. Personal protection is the primary focus, although some cover threats or intimidation (CNPEA, 2006). They vary in their scope of what constitutes violence or abuse. Some include psychological/emotional (e.g., Manitoba, Saskatchewan) and material/financial abuse (e.g., Saskatchewan, North West Territories) while others do not (e.g., Nova Scotia, Yukon). Further, only two provinces include 'deprivation of necessities' in their definition (e.g., Prince Edward Island, Newfoundland) (Hall, 2008).

Most provincial legislation includes protocols regarding reporting, charging, interventions and remedies. According to one key informant, however, they vary with respect to how the relationship is defined but primarily cover spouses or intimate relations, focusing very specifically on people living in the same household.

Manitoba has implemented a Family Court Model which takes the legislation one step further. The Court model is intended to address family violence issues specifically so they are sensitive to family issues and dynamics. This special court ensures that cases do not become delayed within the regular court system. During 1990-1997 the Manitoba

family court model worked with 23,009 family violence cases and saw increasing numbers each year until 1994 (Statistics Canada, 2000).

Drawing on legislative frameworks as an intervention for family violence has both strengths and challenges. It is suggested that legislation focusing solely on family violence provides a sense of importance (awareness raising) to the issue as opposed to it being embedded within other legislation dealing with broader family concerns. Further, a key informant noted how it is presumed that some resources or funding will accompany the legislation- education, programming, services- so this is considered a strength. Conversely, criticisms of employing a legislative framework include resources being spent on bureaucracies and the penal system when equal efforts on prevention may be more successful. Legislation tends to focus on dealing with crisis situations and is not usually aimed at prevention.

Finally, a legislative approach may be considered top down or too directive in the sense of how family violence should be managed. Overall the results of this approach have not been all that favourable.

2.11 Summary

Family violence research emerged during the 1970s with advocates from the woman's movement breaking the silence and promoting awareness of the pervasiveness of family violence perpetrated against women and children. Family violence definitions are complex as they can be broad and inclusive including non-physical acts such as emotional, psychological, material, and financial abuse or neglect and other behaviours such as physical abuse or neglect.

Family violence embodies the ideologies of familialism, capitalism, and patriarchy. Societal perceptions of familial values and roles can induce stressors that lead to violence between partners whether legally married or not, between parents and children or youth, between siblings, or other relations. Due to the wide spectrum of family violence, various frameworks have been examined to attain a more in-depth approach to the topic of families and the structures they embody. Furthermore, the social patriarchal view that families often conform to regarding gender roles and power and control issues can be historically embedded with the realm of family violence.

Family violence has been explored from a number of theoretical frameworks. While the field has advanced significantly through the application of these frameworks, they do not always facilitate understandings of all the complexities and issues associated with family violence. For example, the psychological approach offers insight into the personality disorders and mental illnesses associated with abusive behaviours, but these narrow conceptualizations tend to dichotomize and do not account for ways in which violence is perpetuated and sustained through and by societal institutions. The sociological approach focuses on learned or socialized responses to situations or has an emphasis on situational stress. There is merit in these approaches as they focus on the role of gender, but at the same time they foster inappropriate notions of victims being responsible. Other frameworks include structural and political theory that examine how institutions reproduce and reinforce ideologies that foster power and control through patriarchy, often

reinforcing discrimination toward women. As an alternative to these theoretical frameworks, the ecological perspective enables examination of community, family, and societal risks of family violence through various levels of the familial system including interactions that affect the family as a whole, the family's social network(s), social supports within the community, and dominant ideologies. There is need for a conceptual framework that extends beyond individual and situational experiences of family violence as these experiences transfer to abuse of older adults through the intersection of patriarchy, capitalism, and familialism.

Measuring, screening, and assessment are key issues in the discussion of family violence. English-only instruments can create controversy or be a factor with regard to the scope and focus of definitions and evaluation. This barrier prevents multiple ethnicities from participating in screens or assessment surveys related to family violence. Issues can also arise if there is a focus on interpersonal conflict and ranking of factors. One measurement examines interpersonal conflict by ranking reasoning, verbal aggression, and physical violence while ignoring psychological abuse and issues of power and control. Many measurements, screens, and assessments are generalized too quickly, are inherently biased, or limited in evaluation. For example, the widely adopted Conflict Tactics Scale (CTS) is predicated on the assumption that family violence arises from interpersonal conflict. This implies that conflict occurs spontaneously rather than being an embodiment of power and control unequally embedded within family relationships. Various scales also appear to rank manifestations of abuse, suggesting that some forms are of greater seriousness than others. For example, the CTS conceptualizes psychological abuse as less severe and tends to ignore violence that is used as attempts for power and control. The concerns around measurement, screening, and assessments can be complicated by reporting issues. Given the social stigmas associated with family violence, reporting such circumstances can be problematic or limited as individuals may be hesitant due to fear, humiliation, or a sense of shame. Individuals may worry about the repercussions they or their family faces for disclosing such behaviour. Limited knowledge about interventions through either public institutions or the justice system can also lead to the reluctance to report... However, through reporting, individuals are able to receive care, support, and knowledge via appropriate interventions and response systems.

There are many lessons to be learned from the existing intervention programs and legislation pertaining to family violence. Successful programs appear to be community based and those which have adopted partnership, collaborative, and lifespan models and coordinate a range of relevant resources. Family violence legislation varies from province to province, in some instances being embedded in legislation related to social or family services generally. A challenge with such legislation is that it tends to include narrow criteria related to relationships and households thereby neglecting to address broader situations that exist in the abuse and neglect of older adults.

3. What Do We Know About Older Adult Abuse?

3.1 *Overview*

Abuse and neglect of older adults is a consistent and widespread social problem within Canada that has gained public attention since the mid to late 80s. The scope of such abuse can include violence between older partners whether legally married or not, adult child to parent, other family relative (e.g., blood or marriage) to older adult or non family relation to older adult.

"Elder abuse is a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person" (Action on Elder Abuse, 1995, p. 4). It can include a range of physical, psychological, emotional, material/financial abuse or neglect (Roberto, Teaster, & Duke, 2004; WHO, 2002). Sexual abuse and violation of civil rights (Roberto et al., 2004; WHO, 2002) have also been identified as forms of older adult abuse.

The first national study on the abuse of older adults in Canada was conducted in the late 80s. Accounting for more than 90% of all seniors in the country. The study found that 4% of older Canadians experienced material abuse, chronic verbal aggression, physical violence or neglect (Podnieks, Pillemer, Nicholson, Shillington, & Frizzel, 1990). More recent estimates suggest that between 4% and 10% of older adults experience abuse and neglect. While such data support the growing magnitude of the problem, it is widely recognized that challenges associated with scope, definition and reporting practices likely hamper any accurate accounting of prevalence. The pending demographic change and the impact on families, communities and other social structures give rise to the need for immediate and concerted attention to this issue.

Despite advances in our knowledge and understanding of older adult abuse, little consensus exists in terms of definition, causes, risk factors and approaches to intervention contributing to a less than coordinated or systematic approach to addressing this important social problem. Although individuals living within institutional settings are also at risk for abuse and perhaps even greater risk due to their level of dependency, this setting of abuse is not examined here. The following section examines in greater depth the existing knowledge and practice in the field of abuse of older adults.

3.2 Socio-political Context

Ageism is a social attitude and practice. Through an ageist lens, seniors are viewed as weak, frail, dependant and unproductive. Ageism pervades our public, private, and health institutions; as well as our communities, families, and experiences in everyday life.

Older citizens are often treated with disdain or disrespect and are subjected to discriminatory practices based on stereotypes of aging. The World Health Organization (WHO) and the International Network for the Prevention of Elder Abuse (INPEA) released a report in 2002 called *Missing Voices* based on a collaborative study that explored the perspectives of older persons on abuse. Within this study, disrespect and ageist attitudes emerged as a major theme in all countries. Participants spoke of

disrespect as a risk factor contributing to abuse, but also as a form of abuse in and of itself. They provided examples of the experiences of disrespect that they encounter on a daily basis; including disrespect from younger generations, negative stereotypes in the media, disrespect within health care systems and public and commercial institutions. In particular, participants discussed their experiences of mistreatment within various public transportation arenas. Inadequate public policies and public services may be seen as forms of societal abuse against seniors. They may also foster further abuse through the isolation of older persons as they become reluctant to utilize services.

Ageism is a prevailing theme within the literature of older adult abuse, a theme that was echoed throughout all our key informant and focus group interviews. Many examples of institutionalized ageism were readily available. For example, many focus group and key informant participants described the ageist nature of mandatory reporting policies. In particular one key informant who works with clients in the family violence and senior abuse fields mentioned his/her surprise by the strength of resistance that some of his/her older clients expressed toward mandatory reporting policies. The key informant explained that from his/her view, they have already lived through abusive experiences and they do not want any more control taken from their lives. Another example, highlighted within Harbison and Morrow (1998), is that of mandatory retirement policies which require those 65 years of age or older to give up their source of employment. These policies are ageist in that they are based on the assumption that older individuals increasingly become less productive and a burden to society. In addition to the loss of independence that employment provides, seniors also lose their vocational or professional role in society (WHO, 2002).

Ageist attitudes continue to be reinforced through our public and private institutions despite the fact that seniors, as a group, hold significant economic and social power. Harbison and Morrow (1998) indicate that part of the reason why older adults, as a group, have not coordinated public awareness and advocacy campaigns may be the result of their struggle to maintain a positive social identity in the face of widespread negative and disempowering constructs of old age. Leroux and Petrunik (1990) explain that the *condition of old age* becomes an artificially created *master status*. This master status, according to Leroux and Petrunik (1990), which most often encompasses ageist views, becomes the dominant status in which society views an older individual. Seniors, again, are viewed as persons who are powerless and in need of aid.

As discussed earlier, where we intervene in society is informed by how we conceptualize an issue where we believe that issue is positioned. Societal responses to older adult abuse have often been shaped through disempowering and marginalizing discourse based on ageist perceptions. Harbison and Morrow (1998) highlight three common overlapping conceptualizations of older adult abuse that have informed Canadian responses, including adults in need of protection, victims of domestic violence, and persons subjected to illegal acts. Finally, they propose a fourth empowerment-based conceptualization of seniors as agents of their own lives.

Protective conceptualizations of older adult abuse are based on early child-welfare models (Harbison & Morrow, 1998; Vinton, 1991; Wolf, 2003). Abused older adults are viewed as persons who are unable to help themselves or make decisions regarding

whether or not they require assistance and what that assistance might entail. Responses are paternalistic and ageist in nature.

Desmarais and Reeves (2007) highlight adult protection and mandatory reporting as the main sources of legal intervention and discuss how these interventions strip older adults of their right of choice. Older adults become disempowered through these policies and lose what little control they have within or already difficult situation. Reporting barriers are commonly deliberated within abuse of older adults, as there is a widespread reluctance on the part of seniors to discuss issues in family violence (Wahl & Purdy, 1991; WHO, 2002). Some of this reluctance is attributed to the fact that many older adults were raised at time when self reliance and family privacy were prominent values (Harbison & Morrow, 1998). These themes pertaining to reporting emerged during the project's groups, as well as our discussions with key informant interviews and were described as major barriers to intervention. Some participants added that older clients within their organizations seem to be reluctant to seek help because they do not want to cause legal trouble for members of their family.

Similarly, Harbison and Morrow (1998) discuss how protective responses such as mandatory reporting fail to consider a variety of levels of competence. As previously noted, many focus group participants and key informants indicated that older adults opposed the concept of mandatory reporting policies. One key informant indicated that it is unacceptable to apply a child abuse model to older adults who have been abused. As an alternative, key informants and focus group participants discussed models of intervention based on empowerment, participation, and choice.

The second conceptualization discussed by Harbison and Morrow (1998) is seniors as victims of domestic violence. Intimate partner violence within the older population continued to be hidden long after domestic violence began gaining attention as a public issue (Harbison & Morrow, 1998).

As discussed earlier, one major debate within family violence scholarship is whether intimate partner violence is a gendered issue. Many prevalence studies have indicated that men are just as likely to be abused by their female intimate partners (Gelles, 1974; Strauss & Gelles, 1990). However, critics of such studies are quick to point out flaws or biases within survey instruments. For example, as discussed within a previous section, one widely adopted instrument utilized for identifying intimate partner violence, the Conflict Tactics Scale, is based on the perception that violence is the outcome of conflict between individuals and that violent acts can be measured in terms of severity (Dekeseredy & Schwartz, 1998). Supporters of a gendered approach to domestic violence point to differences in reported explanations for violence between genders, power and control issues, and the differences in the experiences and outcomes of violence between genders. For example, while men and women may both be at risk for experiencing intimate partner violence, women may be more likely to report being forced to use violence as self defence.

Although domestic violence was championed by the women's movement and continues to be championed by women today feminist models for intervention have been criticized for their focus on the experience of younger to middle-aged women. The experiences of older women have often been pushed to the margins. One key informant indicated that there seems to be a hierarchy of priorities in relation to the disbursement of public resources for domestic violence support services where young women, in particular, young mothers, receive first priority. One strong criticism of publicly funded interventions of IPV in Canada, particularly in reference to shelters and housing highlighted within our discussions with key informants, is the lack of funding to programs designed for the needs of older adults.

Another criticism of feminist explanations for abuse, highlighted by Harbison and Morrow (1998), is their failure to consider ageism and generational differences, including the prevalence of family violence towards older males.

The third conceptualization discussed by Harbison and Morrow (1998) refers to older adults as persons subjected to illegal acts. Some forms of abuse are defined under the criminal code and can be pursued by older adults and their representatives as illegal acts, in particular, physical and sexual abuse, forms of psychological and emotional abuse, forms of neglect, and forms of financial exploitation or abuse (CNPEA, 2006). However, a strong sense of familialism and family privacy, as discussed earlier, often prevents seniors from reporting abuse. Older individuals are often reluctant to seek help in fear of the legal ramifications that their family member may suffer. One focus group participant from a community service organization indicated that older clients will often choose to defend the financial abuse that they are experiencing at the hands of their adult children. In fact, some seniors may not define their situation as abuse; they may be making the choice to do without in order to financially assist their son or daughter. A Californianbased study by Kelly (2003), involving forty-five interviews with legal advocates, activists, policymakers, shelter workers, attorneys, and police officers highlighted many challenges and limitations of legal intervention in domestic violence. These challenges and limitations are often based on the differences in ability and willingness to seek legal intervention. Moreover, many of Kelly's (2003) interviewees reportedly felt that only victims who were judged *rational* seem to have access to legal intervention.

Although interviewees within Kelly's (2003) study repeatedly recognized the symbolic importance of publicly defining violence as a criminal act, they warned against relying on the legislation as an all encompassing solution. Ideologies that sustain the problem continue to be adopted and reinforced by societies. Kelly (2003) further suggests that although not every individual is directly affected by domestic violence, everyone has a responsibility in effectively addressing it. Something more is needed to disrupt the dominant ideologies and discourse that continues to allow perpetrators of all forms of family violence to justify their behaviour and communities to continue to accept it.

Harbison and Morrow (1998) point to the importance of understanding the different ways in which the abuse of older adults has been conceptualized through common frameworks and the impact that these conceptualizations have had on models of intervention. Prominent models of intervention in the abuse of older adults, including situational, social exchange, and symbolic interaction models, have been criticized for failing to consider the nature and context of violent acts. Feminist models, as discussed earlier, have been criticized for their failure to consider the abuse that older men suffer. Harbison and Morrow (1998) further indicate that models based on family violence and feminist

frameworks fail to fully consider the issue of ageism. Responses remain individualistic in nature and tend to focus on one form of violence or another. Fractionalized expertise and scholarship within these models continue to be fostered. One key informant's perception was that *everyone is working in silos* and expressed a desire for everyone to *begin to work together and think outside the box*.

Harbison and Morrow (1998) propose a new empowerment-based construct where older adults are agents of their own experience who have control and choice amongst a range of options and the ability to participate fully in society. However, the older population to date has not been fully involved in advocating for change about older adult abuse issues. Social service and healthcare professionals, community service providers, and policy makers have directed research, prevention, intervention, and treatment programs on the abuse of older adults (Harbison, 1999; Leroux & Petrunik, 1990). There are many reasons why seniors have not as a group taken up the cause of older adult abuse. As suggested earlier, older adults may struggle to maintain a positive social identity, therefore, may be reluctant to advocate for an issue that may be associated with ageist stereotypes. There may be a general reluctance to talk about issues of family violence due to widely held values of privacy and independence. Harbison (1990) also refers to the tendency of older adults to respect and accept the view of professionals within the field. This may be punctuated by the internalization of widespread ageist attitudes. Finally, older adults may be reluctant to become involved if they have had previous negative or unsatisfactory experiences in seeking help or in attempting to participate in research on family violence or other social issues.

3.3 Theoretical Framework

3.3.1 *Situational theory.*

Situation theory is the most widely utilized perspective on older adult abuse. The situational model is based on the premise that stressful situations foster violence. In the case of older adult abuse, caregiver stress is often suggested to be a risk factor for abuse, while the senior, who is viewed as being frail, dependent, and cognitively or physically impaired, is postulated to be the source of stress (Health Canada, 2000). Stress factors within this model may be associated with the senior, the caregiver, or economic conditions of the family. Factors associated with the individual experiencing older adult abuse have included dependency, age related health issues, cognitive and physical impairment, and difficult personalities that may be brought on by dementia or Alzheimer's (Kosberg, 1988; Kosberg & Nahmiash, 1996; Rathbone-McCuan, 1980).

Situational theory has been vigorously debated within the literature. Criticisms of this perspective have been that it seems to promote the blaming of individuals who are experiencing violence and the reduction of perpetrator responsibility. Within this perspective, there is also a tendency to overlook the social context of the violence (Harbison et al., 1995). In addition, one major criticism of the caregiver stress perspective within this model is that it does not address the fact that not all caregivers facing the same stress use violence as a coping mechanism (Health Canada, 1998; Reis & Nahmiash, 1998).

3.3.2 *Social exchange theory.*

Social exchange theory is based on the assumption that social interactions involve an exchange of rewards and punishments and that all people seek to maximize rewards and minimize punishment (Glendenning, 1993; Phillips, 1986).

People have different capacities for access to resources and skill sets to offer services to others (Health Canada, 1998). Within the social exchange perspective an assumption is made that as people age they lose their ability to offer services to others, in essence, their power, and become more and more dependant on others for care (Harbison et al., 1995; Phillips, 1986). It is thought that this increasing vulnerability is what places them at increased risk for abuse.

One major criticism of this perspective is that it is based on the ageist assumption that individuals become powerless as they age (Health Canada, 1998). Leroux and Petrunik (1990) refer to this phenomenon as the created "master status" (p. 653) of older individuals in which they are perceived as frail, helpless, and dependant. This perception fosters the belief that older individuals are nonproductive and a burden to society (Encel, 1995). Researchers, however, have disputed this assumption arguing that it is often the abuser's dependence on the older individual that increases the risk for abuse (Pillemer & Suitor, 1992).

3.3.3 *Symbolic interaction approach.*

The symbolic interaction approach draws from family violence literature pertaining to social learning and modelling theory (Harbison et al., 1995; Health Canada 1998). Social learning theory takes a cyclical approach to violence and contends that abusers learn to be violent through witnessing or experiencing violence (Gelles, 1979). It also contends that in families where abuse was present members tend to be more accepting of abuse (Health Canada, 1998).

Central to this perspective, in relation to abuse of older adults, is the behaviour of both the senior and the caregiver and their interpretations of this behaviour (Health Canada, 1998). Negative interpretations by caregivers towards the older individual, including what might be perceived as disagreeable or ungrateful behaviour, may increase the risk of violence.

Intervention strategies based on symbolic interaction theories often focus on changing interpretations of behaviour (Health Canada, 1998). Critical reviews of this approach have highlighted that not all caregivers who have experienced abuse as children exhibit abusive behaviours as adults.

3.3.4 Feminist model.

Feminist theories of violence center on the concept of violence as a form of male control over women. Dominant patriarchal ideologies within society are highlighted which place women at risk for violence within their everyday lives. Gender is often cited as a risk

factor for violence on the premise that women have been marginalized throughout their life course (Aitken & Griffin, 1996).

Conceptualizations of older adult abuse within feminist models draws from family violence literature, particularly, IPV violence towards women. Many researchers point to the high incidence of intimate partner violence toward older women (Harbison et al., 1995). Scholars have postulated that in many cases, the violence is not new that, it is in fact, IPV grown old; however, it should be noted that many older women within intimate partner relationships are at risk for IPV with or without a prior history of abuse.

Feminist interventions embrace consciousness raising and social support and learning programs (Health Canada, 1998); including storytelling groups, public advocacy work, education and awareness campaigns, and shelters and safety programs for women escaping violent situations. Of note, one major criticism of IPV research is the lack of emphasis placed on the experiences of older women (Harbison & Morrow, 1998). One strong criticism of publicly funded interventions in relation to IPV in Canada, particularly shelters and housing, is the lack of funding for programs designed for the needs of seniors. Many scholars and practitioners caution that this model does not consider the incidence rates of violence against older men. Furthermore, gay and lesbian family violence literature has called into question gendered arguments regarding IPV.

Others have pointed to the high incidence of caregiver abuse amongst women. However, these statistics ought to be considered along with patriarchal views of women as primary caretakers within the family.

3.4 Naming

Similar to issues raised with respect to language and naming of family violence, issues with naming abuse of older adults exist and continue to evolve. These issues have implications for understanding the scope of the problem, measurement and the interventions employed. For example, several studies have placed abuse of older adults in the broad context of family violence to help situate it in a holistic community response (Health & Welfare Canada, 1993), others have attempted to provide a common framework for research and intervention purposes (National Advisory Council on Aging, 1991) while others assert that existing definitions can be categorized as connotative definitions, structural definitions and denotative definitions (Stones, 1995).

Despite ongoing dialogue and debate, there is no standard definition of older adult abuse across countries, within Canada or across sectors. This has largely been fuelled by the fact that definitions have developed from different perspectives (e.g., policy maker, abused older person, health care practitioner, and police) (Health Canada, 2000). While this limits the comparability of prevalence data and evaluation studies, it is suggested that as long as the definitions used are clear and consistently applied, important information in advancing our understanding of this phenomena can be obtained (Spencer, 1995). For example, Health Canada (2000) utilized the definitions of abuse established by the National Centre on Elder Abuse in the United States because there was some consensus that it was valuable.

Larger issues rest with the label of *elder abuse* itself and whether the scope of the harm includes neglect by others or self neglect. The label elder abuse is still commonly used in many countries today, but this language presents problems for certain ethnic and religious communities for which *elder* has specific meaning, and it also suggests to some that the situation only pertains to the oldest of the old (Health Canada, 2000) thereby limiting the scope of the population affected. Terms such as *senior* abuse (as now being promoted in Nova Scotia) is a plausible alternative, but with it implies a specific age criteria and challenges concerning whether an older person sees themselves as a senior based on some arbitrary age criteria. Using direct language such as *older adults* is generating increased preference as it is not sensitive to age criteria or cultural specificity (Health Canada, 2000).

Another issue with respect to naming or defining abuse of older adults is the venue in which it occurs. This is somewhat distinct from the field of family violence as for the most part *domesticity* of violence is emphasized. However, when considering abuse and neglect of older adult settings, other domestic contexts need to be considered. While awareness of abuse and neglect of older Canadians emerged in the 80s, it was not until some time later that Canada became interested in understanding the situation of older persons living in congregate or institutional settings (Health Canada, 2000). By including these situations into the definitional dialogue, new dimensions are introduced because of the more formalized nature of the relations (Health Canada, 1994, 2000).

3.5 *Reporting*

Reporting of abuse and neglect of older adults can transpire from the older person, his or her caregiver, friend or other family member, or a practitioner. As previously stated, the prevalence of this social problem is under represented and this is largely due to challenges associated with current screening and assessment practices and the general lack of reporting of such cases to authorities. Reasons for this lack of reporting by practitioners include difficulty detecting abuse, particularly psychological abuse and neglect; increased social isolation of older adults reducing access and visibility; lack of suitable, easily administered screening tools; and, poor awareness of the size and scope of the problem (Health Canada, 2000). Reasons for lack of reporting from family members or friends include a lack of awareness about where they can get assistance, lack of awareness of process, and resistance to get involved (Health and Welfare Canada, 1993). Reasons for lack of reporting by older persons include their reluctance to acknowledge abuse in a face to face interview with a professional, fear of more abuse, fear of loss of caregiver/family support and therefore at risk for institutionalization, sense of blame/ownership for the abuse as a result of parental or spousal role, shame/public humiliation, denial, lack of self-esteem/assertiveness largely as a result of the abuse, lack of awareness of available services to help and impaired understanding of the situation and/or process as a result of low education and or cognitive impairment (Boyack, 1997; Health Canada, 1993, 2000). One response to abuse and neglect of older adults for persons who are vulnerable as a result of physical or cognitive frailty has been legislation such as adult protection laws which include provisions for reporting. More recently, other laws have been enacted that govern persons in care in congregate or institutional settings. These laws provide for mandatory reporting of cases in which an individual is believed to be abused, neglected or in need of protection. Arguments in favour of mandatory

reporting in these instances include the increased awareness that such legislation provides, opportunity for early intervention, and potential deterrent for onset or ongoing abuse by perpetrator (Gordon & Tomita, 1990). Arguments against mandatory reporting are many but primarily speak to concerns about the paternalistic nature of such legislation (e.g., no choice) and potential infringement on rights and freedoms of an individual (CNPEA, 2003; Gordon & Tomita, 1990).

3.6 Screening and Assessment

The point at which older adults access health care services such as home care, adult day programs, hospitalization, geriatric assessments, is when abuse or neglect of an older person may be detected by a practitioner. There is no standardized approach to screening or assessment of abuse and neglect rather various tools exist to help practitioners in this regard. They include: QUALCARE scale (Health Canada, 2000), Sengstock-Hwalek Comprehensive Index of Elder Abuse, Older Adult Protective Services Investigation Report, Protocol for Identification and Assessment of Elder Abuse and Neglect (Kozma & Stones, 1995), Comprehensive Geriatric Assessment, AMA Assessment Protocols for Physicians, Adult Protective Services Protocols, Rick Factor Checklist, Mount Sinai/Victim Services Agency Elder Abuse Project Questionnaire, Elder Assessment Instrument (Schofield & Mishra, 2003), Identification of Abuse and Neglect of the Elderly, Elder Abuse Detection: Indicators, Brief Abuse Screen for the Elderly, and Indicators of Abuse (IOA) (Health Canada, 2000; Reis & Nahmiash, 1998). Criticisms related to some of these instruments include generality; focus on one or few aspects of abuse over reliance on subjective impressions of practitioners, consideration of the interactional aspects of abuse, and the use of different sets of risk factors.

One widely used assessment tool in the home care field, the Mini Data Set for Home Care (MDS-HC), incorporates a set of markers that can be used to help practitioners identify situations of potential abuse when older adults are accessing publicly funded home care services. A US study using data from the MDS-HC assessment found that signs of potential abuse are associated with a diminishing social network and poor social functioning, although some characteristics of the older person's health are also contributing factors (Shugarman, Fries, Wolf, & Morris, 2003). Similarly, the IOA screening tool developed for and used by practitioners identifies cases and indicators in which older adults are abused by their caregivers (Reis & Nahmiash, 1998). Like most other measures, IOA focuses on the situational characteristics of the caregiver and care receiver. Validity and reliability analysis suggest that the tool is successful in discriminating cases of abuse from non abuse in 78-84% of cases. Factors associated with abuse include caregiver's personal and interpersonal functioning, financial dependence and lack of knowledge or understanding and care recipient's insufficient social support and history of past abuse. Reis & Nahmiash (1998) found that family conflict was also an important theme and while many of these factors are individual or situational related, other situational factors such as caregiver stress, care receiver having physical or cognitive impairment and needing help with activities of daily living did not emerge as discriminating (Reis & Nahmiash, 1998).

Examples of self-reporting measures include Sengstock-Hwalek Screen (Reis & Nahmiash, 1998) and the Vulnerability to Abuse Screening Scale (Schofield & Mishra, 2003). Preliminary validity analysis on the latter scale with a sample of older women offers evidence that the scale can detect physical and psychological abuse.

An example of a screening tool for reporting by a caregiver is the *Caregiver Abuse Screen* (Reis & Nahmiash, 1998).

3.7 *Intervention*

3.7.1 *Programs and services.*

Through dialogue with focus group participants and key informants, many examples of successful programs that address issues of older adult abuse were discussed. Key themes mirroring those within family violence programs began to emerge. In particular, key themes came forward regarding the importance of coalitions and sharing resources, addressing issues of older adult abuse through a lifespan approach, and fostering models of empowerment and participation.

While discussing the *Premier's Action Committee on Family Violence Prevention* (Prince Edward Island) one key informant spoke of the critical role that the representative from the PEI Seniors Citizens Federation played in keeping violence against seniors and senior's issues on the agenda. Through diverse membership, the action committee was able to balance competing agendas, foster social learning, and continue to maintain a lifespan approach.

Approximately five years ago the *Family Services Association of Toronto* formed an elder abuse consultation team. The consultation team is comprised of a diverse group of representatives, including but not limited to, representatives from the crown attorneys office, home care, housing, women's initiatives, Alzheimer's Society, geriatric social workers, and survivors of abuse, who meet once a month to review cases of abuse. The mandate of the group is to review cases of abuse within the community in a confidential manner. As issues of abuse are presented, members discuss possible solutions in a multi-disciplinary manner and inclusive manner.

Another success story of collaborative family violence programming in Canada is the Kirby Centre. This is a multipurpose centre for seniors aged sixty and over. As a result of a collaborative project between the Kirby Centre and Health Canada entitled *Synergy 2* researching elder abuse in Calgary, four recommendations were brought forth. Those recommendations included the development of a handbook on elder abuse for frontline workers, the development of a shelter for abused seniors, a crisis line, and a sharing circle for those who have left the shelter and are reintegrated back into the community.

The Kirby Rotary House Shelter was built as a part of this initiative and now offers secure shelter to both men and women over sixty years of age in the Calgary area. The shelter provides many services, including crisis intervention, advocacy, and counselling support. The Kirby Centre also runs a seniors crisis line where a crisis counsellor is available 24 hours a day.

The third recommendation, the sharing circle, is a follow-up program for seniors who have left the shelter. Through the sharing circle seniors have the opportunity to discuss issues they would like to explore with the assistance of a facilitator (crisis counsellor). They explore topics of their choosing which are often related to issues within their everyday life.

One key informant indicated that collaboration and participation are strong values of the Kirby Centre. For example, the Centre is part of a local action group on abuse of older adults and representatives of the Centre often engage in public conscious raising and educational endeavours with the local community. The Centre partners with community volunteers who offer workshops for seniors.

Another key theme emerging from the focus group and key informant discussions was the importance of safety programming for seniors. One key informant discussed the Safe Seniors at Home program offered through the Royal Canadian Mounted Police (RCMP). The program involves a diverse body of volunteers who work directly with police to visit seniors in their home in order to conduct safety audits and determine what their needs may be. Another provincial safety program offered through the RCMP is the Seniors Academy, a 6-week course where seniors receive similar training to that of police. This has not only provided much welcomed training for seniors, but has also brought a sense of familiarity with protective services. Seniors who have graduated from the Academy may be more likely to seek help from the police or report abusive behaviour. Another positive aspect of both of these programs is that they combat isolation and empower seniors to continue to be active participants within their communities. Through these programs seniors have the opportunity to meet with fellow community members and discuss issues relevant to their everyday life.

Finally, the importance of approaching older adult abuse issues through a lifespan perspective was discussed by focus group participants and key informants. One key informant mentioned that the strategy of the Province of Manitoba for Elder Abuse Awareness Day this year is to focus on schools. The Manitoba Seniors and Healthy Aging Secretariat has developed a video called "seniors are cool" aimed at challenging ageist stereotypes that young people have about seniors.

3.7.2 Policy and legislation.

At the federal level there are provisions within the Criminal Code that pertain to family violence and these provisions may be extended to situations of abuse involving older adults. "They include physical or sexual assaults, intimidation and harassment as well as crimes such as theft of property, fraud, or theft by power of attorney" (CNPEA, 2006, p. 4). However, very few of the Criminal Code provisions are enacted in response to abuse or neglect in later life. It is suggested that when a close relative is involved, older adults are reluctant to lay charges so it becomes the practice not to charge (CNPEA, 2006). As well, because of the often long time frame between laying charges and prosecution, changes in the individual's health status (either physical or cognitive) may result in the individual who was abused being unavailable as a witness (CNPEA, 2006).

At the provincial level various laws exist pertaining to adults and these laws have different intents and scope. For example, the four Atlantic Provinces and the Yukon have standalone adult protection legislation (CNPEA, 2006; Nova Scotia Health, 2004). Several other jurisdictions utilize existing adult guardianship legislation (e.g., British Columbia) while others draw on additional areas of legislation such as general family violence, public trustee, and mentally incompetence acts. However, other than legislation in New Brunswick, none are specifically for older adults. This trend is different than in United States, for example, where select states have specific elder abuse legislation (Hall, 2008).

Drawing on family violence acts alone may present challenges for the discussion of older adults if they focus only on same household relations and abuse as opposed to neglect (CNPEA, 2006). Further evidence from the Manitoba Family Court Model suggests that this specialized justice system is ineffective in handling cases involving older adults. Less than 2% of all the cases handled involve older adults. Possible explanations for low utilization offered by a key informant include that the type of cases do not fall within the purview of the court or that the cases are diverted into the health system as opposed to the justice system. More generally, it is suggested that the court does not have the capacity to address the special issues as they relate to abuse and neglect of older adults.

In Nova Scotia the Adult Protection Act enacted in 1985 was intended to serve vulnerable adults who were living at home and were victims of abuse, physical, sexual, or psychological or neglect by a caregiver or self-neglect. The act would provide short-term remedies until long-term solutions were put in place (Nova Scotia Health, 2004). Generally speaking, adult protection legislation as in Nova Scotia pertains to persons who are incapable of protecting themselves against harm due to physical or cognitive impairment, with the exception of New Brunswick protection Act where there is no provision for incapacity. Adult protection legislation in the other provinces is similar in scope, focusing on a very specific population but may vary in its scope. Yukon and Prince Edward Island, for example, include material mistreatment.

Also emerging on the legislative landscape are special laws to cover adults living in congregate or institutional settings. These are commonly referred to as *Protection of* Persons in Care Act and such legislation exists in Alberta, Manitoba, and Nova Scotia; while a key informant indicated that Saskatchewan is considering this legislation. It is suggested that this specialized legislation has emerged from the inefficacy of other legislative processes. A key informant interview outlined that there are limitations to these acts, largely because they only cover certain types of congregate housing; usually publicly funded and they vary in their approach to who is responsible for reporting.

Drawing on legislative frameworks as an intervention for situations of abuse and neglect for older adults has both strengths and challenges. These Acts in their purest sense are intended to protect those who are unable to protect themselves either due to physical or cognitive frailty. So in this regard, they can serve an important role for a very specific population. At the same time, without rigorous assessment protocols and proper safeguards in place, the rights and freedoms of an individual may be infringed. According to other sources, another concern about adult protection legislation is: provinces' inability to provide appropriate services and supports that are specified in the legislation in view of diminishing health and social services budgets. So while the Act may call for such intervention, unless concomitant resources exist, individuals who come under the Act are not beneficiaries to the full intent of the Act (CNPEA, 2006). Further, an over reliance on adult protection legislation may result in a lack of attention to family violence models such as services for victims or shelters. Moreover, the current legislative approach does not specifically target the older population and as suggested by a focus group participant, can be viewed as paternalistic.

3.8 *Summary*

Abuse and neglect of older adults is a consistent social problem that gained attention during the 1980s. Older adult abuse is often regarded as "a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person" (Action on Elder Abuse,1995, p. 4). The first and only national study was conducted in the late 1980s reporting that 4% of older Canadians experience some type of abuse. Regardless of the growing awareness of older adult abuse, there continues to be a lag in achieving consensus in defining it, in identifying risk factors, and in developing intervention strategies. Ageist attitudes are a common theme in relation to older adults wherein they are often treated with disrespect and viewed as being frail and dependent. Ageist attitudes continue to be reinforced through our public and private institutions despite seniors, as a group, holding significant economic and social power. However, old age continues to be constructed and viewed in a negative, disempowering way.

Older adults experience ageist attitudes through personal experiences including disrespect from younger individuals, negative stereotypes, disregard from the health care system and public or commercial organizations. Policies and legislation can also be ageist in nature, for example, mandatory reporting of elder abuse has the potential to disempower by removing control and agency from the hands of the older adult. Furthermore, the loyalties arising from familialism discourage older adults to report abuse enacted by family members.

Abuse and neglect of older adults has been examined from a variety of theoretical approaches, however, numerous critiques suggest they do not adequately encompass the entirety of the issue. For example, situational theory acknowledges that stressful situations such as dependency, financial stress, or health issues foster violence, but this approach has a tendency to place blame on those experiencing the abuse and reduce perpetrator responsibility. Caregiver stress has also been noted under situational theory although a criticism is that the caregiver stress perspective does not address that not all caregivers facing the same stress use violence as a coping mechanism. The social exchange approach assumes that individuals lose their ability to provide services to others therefore becoming more dependent on others. This vulnerability increases one's risk for abuse. The symbolic interaction approach focuses on violence as an act learned through witnessing or lived experiences. This approach notes that not all individuals who experience abuse exhibit these types of behaviours. Lastly, the feminist model centers on the ideal that women are at risk due to patriarchal ideologies throughout society although a lack of emphasis is placed on older women and it does not consider the reality of abused older men.

Similar to family violence, research in the field of older adult abuse is hampered by issues with measurement, screening, and assessment. Screening and assessments of abuse and neglect of older adults does not have a standardized approach, rather, multiple tools exist to help practitioners. These tools are generally criticized on the grounds that they focus on one or few aspects of abuse and that they have the potential to be affected by practitioner bias. The issues with screening and assessment practices confound existing challenges with detecting and reporting of abuse as does the challenges with naming and defining what constitutes abuse of older adults. Furthermore, the term elder abuse may pose problems for ethnic or religious groups for whom the term has significant meaning or suggests that abuse is limited to the oldest old. There is no standardized approach to screening or assessing older adults for abuse therefore multiple tools are utilized. For example, one assessment tool helps to identify situations of potential abuse but only focuses on situation characteristics. Understanding the experiences of older adults is necessary, including identifying risk factors for abuse and the ability to analyze relationship paradoxes inherent in everyday experiences of abuse.

Many programs for abuse of older adults are similar to those of family violence. Overall, the importance of collaboration and sharing resources, addressing issues of abuse across the lifespan, and fostering models of empowerment and participation are of great importance to the development of programs, policy, and legislation. Although there is intent to transfer approaches from family violence, program development for abuse of older adults has progressed at a slow pace. Similar to programs within family violence, programs that embody the principles of integration and community development show promise. The development and evaluation of a collaborative practice model is required. These models should focus on the integration of older adult abuse with additional forms of family violence across the lifespan. With respect to legislation, there are varied approaches across the country. Several provinces have acts relevant to older adults but many fall short in the concomitant services and supports due to diminishing budgets. No legislation specific to abuse of older adults exists in Canada.

4. What Can Be Transferred to Older Adult Abuse

This section introduces a proposed framework for the transferability of family violence theory, policy and practice to older adult abuse. This discussion draws upon what we have learned through dialogue with community partners, focus group participants, and key informants and, where possible, provides examples of where the link and/or integration have occurred.

4.1 A Critical-Ecological Perspective on Violence - A Unifying Framework

Family violence and older adult abuse are complex social phenomena that embody the synergies of multiple factors and processes. This is becoming more apparent as researchers increasingly find value in conceptualizing various forms of family violence from an ecological perspective. In particular, as noted previously in this report, Schiamberg and Gans (1999) propose an ecological model for the study of older adult abuse. With the application of this model to manifestations of abuse across the lifespan, comprehensive understandings of the pathways through which structural or ideological conditions and forces, regulatory policies and programs, community-level supports, as well as relational and individual processes have been developed. This is helping to counter the fragmentation evident upon analysis of theory, research, policies and programs in family violence that result from disciplinary and practice boundaries that have developed in the field. Moreover, commonalities and differences with respect to root causes, environmental conditions, and family and individual dynamics are revealed through application of the ecological model.

Integrating key assumptions and propositions from critical theory within ecological conceptualizations of violence also holds promise. Such an integrative approach will enable one to locate the everyday incidence of violence across the lifespan within a larger context and enable one to see how various elements coalesce to create and sustain it. This model can also help to organize prevention and intervention initiatives at various levels of social organization. Essentially, a critical-ecological framework extends the field of family violence beyond partial and incomplete explanations and solutions. Before presenting the proposed model, the relevant themes and assumptions from critical theory are provided.

4.2 *Critical Theory*

The themes of *power and control* and *transformation*, as articulated through critical theory, have particular relevance to the model proposed as a unifying framework for the integration of perspectives from family violence to the realm of elder abuse.

4.2.1 *Power and Control.*

A central assumption of critical theory is that all action and thought is fundamentally mediated by power relations that are socially and historically constituted (Smith, 1987). As such relations are reinforced within society over time, the interests of dominant groups, or those that hold the power, are advanced through the "relations of ruling" (Smith, 1987, 1990) creating a hegemonic system of privilege and control. This system is

most forcefully reproduced when individuals, privileged or not, accept their social status as natural, necessary, or inevitable.

The idea that the everyday practices of individuals embody the power relations reinforced through systemic control is a provocative element of the critical approach and one which has resonance when analyzing family violence overall, or abuse of older adults in particular. Smith (1987, 1990) posits that the actions of individuals in their everyday lives are neither random nor idiosyncratic, but manifestations of macro-level ideologies that may work to oppress and disempower.

Critical theory enables one to see why and how the intersecting ideologies of patriarchy, familialism, and capitalism are rendered visible as practices within the everyday lives of individuals. As noted previously in this report, an analysis of these ideologies has significantly augmented understandings of family violence particularly in explaining the ways in which power and control insidiously work to sustain the attitudes that promote violence in our culture.

These understandings can be transferred to the realm of older adult abuse. Older adult abuse is the violent manifestation of unequal power relations, just as it is with respect to other forms of abuse across the life course. Moreover, it is clear that, in the instance of older adult abuse, ageism can be added to the matrix of inter-locking ideologies that lies at the core of all forms of violence across the life course. Stereotypes that sustain the image of older adults as frail and unproductive members of society are embodiments of ageism working in combination with the other ideologies. For example, as discussed previously in this report, capitalism plays a key role in the devaluing of older adults. When one is no longer "contributing" through paid work, one's worth diminishes an effect that is reinforced through ageist labels and assumptions common within our society. This entrenches the idea of the older adult as less powerful, thereby increasing their vulnerability to abuse. Unfortunately, this vulnerability is intensified when ageist assumptions are taken-for-granted and unquestioned, even by those directly affected by them, a common phenomenon according to critical theorists (Kincheloe & MacLaren, 1994; Smith, 1987), within a culture where disempowering ideologies are historically mediated and reinforced over time.

4.2.2 Transformation.

While many elements of critical theory emphasize the systemic oppression embodied within the practices of power and control in everyday life, there is a complementary facet to critical theoretical understandings that focus on the *transformation* of the structures and processes that oppress and disempower. This emphasis is visible specifically within some of the noteworthy policy and program innovations addressing issues of family violence discussed previously within this report. It can also be said that critical theory has utility in analyzing some of the current transformative practices beginning to emerge in a practical way within the realm of older adult abuse.

These innovations, such as the community development approach to program development and implementation endorsed by Harbison and Morrow (1998), are based on the assumption that once individuals develop insight into the ways their lives are being

oppressed by systemic forces, they can be emancipated from situations through individual and/or collective action (Humble & Morgaine, 2002). This assumption is, of course, predicated on the expectation that the individual perceives their everyday reality as not just a by-product of their choice and agency, but also as an embodiment of societal, macro-level ideologies that do not always work to their advantage. Transformations occur when ignorance and misapprehensions give way to more informed insights by way of the dialectical interaction supported through programs, policies, and research approaches designed to support this.

The first step in transformation is the critique of the social, political, cultural, economic, ethnic, and gender structures that constrain and exploit humankind. Such transformative approaches have yielded theoretical and practical benefits within the field of family violence. Corresponding effects could also be felt within older adult abuse as well.

4.3 Ecological Theory

An ecological framework conceptualizes individuals and families as embodied within a system comprising interdependent levels of the environment (Melson, 1980) referred to as the macrosystem, the exosystem, the mesosystem and the microsystem (Bronfenbrenner, 1979). Transactions between these levels flow bi-directionally from the outer level (macrosystem) inward, and conversely, from the inner level (microsystem) outward. These reciprocal exchanges are thought to be vital to maintaining equilibrium within the system, a proposition that has key significance for this proposed model.

4.4 The Critical-Ecological Model for Older Adult Abuse

4.4.1 The macrosystem.

The macrosystem level of the environment comprises socio-historical ideologies and cultural values embedded within everyday life (Bronfenbrenner, 1977), a phenomenon also discussed by critical theorists (Smith, 1987, 1990). One dominant ideology claimed to be responsible for rendering invisible the experience of family violence is the ideology of familialism. Familialism reinforces the notion of family as private and inviolable and immune to dysfunctional processes. Research in family violence suggests that when experience varies from this ideological ideal, problems of abuse are obscured.

Corresponding effects of familialism are also felt within the domain of older adult abuse. Evidence gleaned from this literature supports the contention that older adult abuse is a hidden issue. Studies cited previously in the report refer to underreporting. This is understandable considering that cohorts of older adults socialized during the middle decades of the twentieth century have a particular stake in upholding familialism. These individuals came of age in a climate of catastrophic economic conditions (the Great Depression) and global turmoil (World War II). Security in the midst of uncertainty could be obtained from representations of the family as the bedrock of society.

The integration of key concepts from critical theory can deepen the analysis of this phenomenon. For older adults living among us today, when experience varied from such

representations, a bifurcated consciousness (Smith, 1987) is a plausible outcome resulting from the disjuncture between ideology and everyday life. Conceivably, the denial of older adult abuse even by those who directly experience it is, in part, attributable to the *fault lines* (Smith, 1987; Walker, 1990) or bifurcations between familialism and the experience of older adult abuse.

Research and theory in family violence provides a compelling account of dominant discourses of power and control as sustained through another macro-level ideology, patriarchy. These discourses are also transferable to the realm of older adult abuse. Participants in focus groups and key informants consistently referred to the abuse of power and control as a root cause of older adult abuse. Indeed, an unequal power relationship between the perpetrator and the person experiencing the abuse is cited as the basis for all forms of family violence across the lifespan (Walsh et al., 2007). Paradoxically, while the dependencies sustained through power and control are often evident within the "victim", in cases of older adult abuse it is often the perpetrator who is financially or emotionally dependent, as noted in one interview with a key informant.

Ageism intersects with the ideology of patriarchy. As a result, older women, in particular, may be at a greater risk of abuse because of the double jeopardy of gender and age. The constructions that denote ageism in our culture and which were articulated previously in this report lend credence to conceptions of the older adult as frail, childlike, and dependent. As can be understood through the integration of critical theory within the proposed model, this exacerbates the hegemonies sustained through patriarchy and reciprocally, can strengthen the ageist assumption that older adults are not legally or socially competent.

Ageism can also transcend patriarchy. This is clear when one considers that, for older adults, gender does not necessarily intensify the experience of abuse. Participants in focus groups and key informants consistently noted that both men and women experience older adult abuse. From this it can be claimed that the power and control inherent in this phenomenon are not directly attributable to patriarchy alone, but also to the marginalization of older adults sustained through ageist processes and practices.

4.4.2 *The exosystem.*

Exosystems provide a regulatory structure for the organization and governance of community supports that operate at the local level. As such, the exosystem can be thought of as an extension of the mesosystem. Government agencies, legislation and institutions responsible for maintaining the social order are examples of exosystem structures (Melson, 1980).

Adult protection legislation is a common mechanism used in some provinces, specifically the four Atlantic Provinces and the Yukon, to protect the rights of vulnerable adults, including older adults. However, as noted by government officials participating in the focus groups, this legislation can only serve the intended purpose if the mandate, target population, and protocols are clear and if there are resources available to implement it effectively. Over-reliance on adult protection legislation may result in reduced emphasis on the family violence model, and may not be compatible with programs and services

such as victim services, shelters, and transition houses for older adults. Given this, alternate models of support and protection are considered in some jurisdictions, particularly legislation that deals with the issues of violence exclusively. On the other hand, family violence legislative frameworks are not necessarily directly useful unless they have broad provisions that accommodate a variety of relations and can provide appropriate remedies.

Mandatory reporting practices have been implemented as a result of concerted efforts invested by advocates in recent years. Child abuse legislation, in particular, enforces mandatory reporting. While it may appear that the adoption of mandatory reporting policies within the realm of older adult abuse would be a desirable protective measure, as noted previously in this report, government officials participating in key informant interviews asserted that this is not supported by older adults themselves. From their standpoint, mandatory reporting is viewed as overly paternalistic and may even work to diminish control and choice.

It is clear from analysis of legislative policies in the family violence realm that legislation itself is one tool and not the sole answer to the issues of family violence and/or situations of abuse and neglect involving older adults. However, it may be one part of a comprehensive approach which includes prevention strategies and adequate supports and services in the health and social service sectors.

4.4.3 *The mesosystem.*

The mesosystem level of the environment refers to the relations between individuals, often involving the intersection of the microsystems regularly involving an individual (Bronfenbrenner, 1979). Relational dynamics are discussed in the family violence realm particularly with reference to sociological theoretical frameworks that highlight social learning perspectives and situational explanations.

As noted previously in this report, caregiver stress theory has long been advanced as a salient situational explanation for older adult abuse. While caregiving may be weighted with stress in certain circumstances, it is fallacious to claim that caregiver stress is the sole tipping point in instances of older adult abuse. Just as researchers and practitioners in the family violence realm acknowledge that substance abuse, unemployment, and other situational factors do not provide a complete explanation of the phenomenon, caregiver stress is also a partial analysis of older adult abuse. One must discern the root causes of the situational stresses in order to claim a full understanding of the problem. This contention was supported by two key informants and is a key principle within critical theory, as noted previously. Extending the analysis to include structural and ideological factors embodied in the day-to-day phenomenon of violence precipitated through caregiver stress yields a more inclusive understanding analogous to prevalent conceptions offered through the family violence literature.

Conceptualizing older adult abuse from a critical-ecological perspective, particularly from the mesosystem level, will further understandings of the ways in which the community can function to coordinate services and programs for older adults experiencing abuse or for those who may be at risk. Communities can also participate in

raising awareness of issues related to older adult abuse through public education. One notable example of a collaborative and sustainable approach to public education through community engagement is the program in Prince Edward Island facilitated through the *Premier's Action Committee on Family Violence Prevention* described previously in this report. While this program does not exclusively address older adult abuse, it is recognized as an exemplary community-development initiative that has fostered a growth in knowledge and understanding about family violence overall. Adopting and applying a similar community-based approach to the work ongoing in prevention and intervention of older adult abuse shows promise particularly as it is compatible with participatory models developed through the application of critical theory that support the agency and empowerment of older adults recommended by researchers and practitioners.

4.4.4 The microsystem.

Microsystems are the settings in which individuals participate directly (Bronfenbrenner, 1979). These can include family, friends and formal and non-formal caregivers. The family violence literature notes that abuse is potentially contained within these settings. In the case of older adult abuse, as noted in literature previously cited in this report, some of those who experience it will not disclose it because of the fear of retaliation, but also because of shame and embarrassment. Focus group participants and most key informants interviewed stated that when the perpetrator is an adult child, the violence is not disclosed because "...they are still my son" or "...my daughter". To reveal the problem would threaten the filial bond valued even in the face of the fear and despair of abuse. This response is similar to that reported by survivors of intimate partner violence who are reluctant to acknowledge the perpetrator as an abuser because of contradictory feelings of love and attachment inter-mingled with the abhorrence generated through violence.

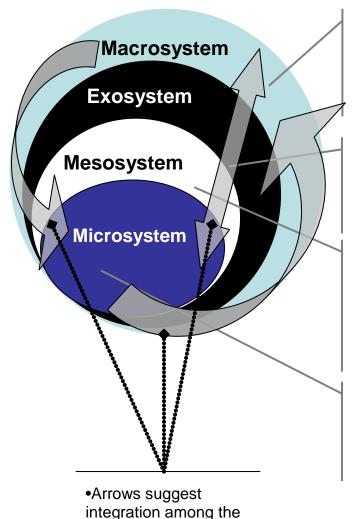
Analysis of family violence at the microsystem level has helped foster an understanding of how the family can be a site for violence. Gelles (1983) and Straus (1983), two researchers cited previously in this report and acknowledged as leaders in expanding knowledge of the sociology of family violence, note eleven characteristics of the family that contribute to the capacity for violence. These characteristics include the amount of time spent together and the intensity of interaction. Paradoxically, these same traits reinforce family cohesion. This means that intimacy and intensity can lead to both family cohesion *and* family violence.

Parallels are evident in analysis of the everyday, micro-level interaction ongoing between older adults experiencing violence and the perpetrators. Perpetrators may be caregivers with close ties to the older adult but proximity and dependence may undermine the relationship and reverse the power and control dynamic, as discussed previously in this report.

4.4.5 Critical ecological framework.

We posit that while the critical-ecological framework offers a beneficial holistic tenor to conceptions of family violence across the lifespan, it also has merit as a vehicle for discussing the aspects of theory, policy and practice that transfer from family violence in general to abuse of older adults in particular. It provides a unifying lens and helps bridge

understandings between what, at face value, may seem to be disparate manifestations of violence and abuse.



levels

- •Familialism
- •Power & control
- •Ageism intersects with patriarchy
- •Ageism transcends patriarchy
- •Legislative frameworks
- Mandatory reporting
- •Support services & programs
- •Situational factors & stress
- Community development approaches to prevention & intervention
- Relational paradoxes
- Social isolation
- Privacy
- Dependence

5. Recommendations: Developing a Research Agenda for Older Adult Abuse

Analysis of research reviewed in the preparation of this report and synthesis of feedback received from participants in focus groups and the key informants have resulted in the development of recommendations for research, program, and policy development in the realm of older adult abuse. These recommendations grouped by category and a brief rationale for each, follow.

Understanding the experiences

Analyze the relational paradoxes inherent in the everyday experience of older adult abuse.

• Older adults face various types of abuse. Their vulnerability to the risk of abuse is often increased by ageist attitudes prevalent within society and their strong sense of familialism. Older adults may not want to acknowledge that their family would do anything to harm them or fear what will happen to their family member if they disclose the violence. Financial abuse is often an inherent situation that some older adults may not view as abuse. They may reason that their family member needed money or there was good motive for them taking it.

Identify the risk factors for older adult abuse.

Older adults may be at increased risk of abuse given situational factors. These
include: caregiver stress, familial stress, financial dependency, previous history of
abuse, and cognitive and physical impairment. Understanding these factors and
their likely contribution to abuse will help target awareness and intervention
efforts.

Theoretical frameworks

Develop conceptual frameworks to advance research in older adult abuse that extend the analysis beyond individualized and situational explanations (such as caregiver stress theory) to include ideological and structural factors.

Expanding the development of theoretical frameworks will help position the
abuse of older adults as an experience situated within the broader realm of family
violence and as a social problem. Outlining causes, consequences, and solutions at
a broader, societal level will extend the analysis beyond individualized and
situational explanations of abuse and neglect and reinforce the importance of
recognizing collective responsibility for this issue.

Analyze the intersection of ageism with patriarchy, capitalism, and familialism within the realm of older adult abuse.

• Family violence is a complex issue and often at the root of family violence are issues of power and control reinforced through patriarchy Ageism intersects and transcends with the ideology of patriarchy. Yet, little analysis has been applied to these intersections. Frail and dependent notions of older adults as well as

traditional views on gender roles contribute to older persons' struggle to gain and obtain power and control in their lives.

Analyze the ways in which ageism transcends gender.

• Family violence research has largely focused on abuse against women. This gender focus is limiting when considering the older population and the nongendered nature of ageism. Both older men and women experience abuse, and both men and women are perpetrators of older adult abuse. A better understanding of ageism and gender is warranted in relation to older adult abuse to inform the development of practice and policy and relevant research.

Research methodologies

Develop and refine research methodologies that support the analysis of contexts, meanings, and motives.

• It is recognized that instruments used to screen/assess older adult abuse are limited by practitioner bias and narrow definitions. Methodologies need to refine language and use consistent definitions as ways to enhance understandings of context, meanings, and motives.

Analyze the contexts, meanings, and motives related to the prevalence and incidence of the abuse of older adults.

• Challenges with the scope, definitions, and reporting practices hamper accurate accounts of prevalence of abuse among older adults. Analysis about social context requires a re-evaluation of definitions, causes, risk factors, and approaches to intervention.

Develop and apply a critical-ecological framework to research on older adult abuse.

 Utilizing a critical-ecological framework facilitates discussion of theory, policy, and practice that is transferable from family violence to older adult abuse. This framework offers a multifaceted and holistic approach to understanding the context of lived experiences, including situational and ideological factors that may contribute to abuse or neglect. The critical-ecological framework establishes an understanding of the origins of abuse or neglect, how it is manifested, and better informs potential prevention and intervention strategies by offering a unifying lens to what seems to be disparate manifestations of abuse and neglect.

Programs, policy, and legislation

Use the critical-ecological framework to identify prevention and intervention strategies that emerge from individual, family, and socio-political experiences and influences.

• The critical-ecological model offers a holistic approach to understanding abuse and neglect because it considers individual and family dynamics as well as community and societal factors. This enables an understanding of prevention and intervention initiatives through various social levels thereby targeting resources more appropriately.

Develop and evaluate community-development models for research, prevention, and intervention that support the agency and empowerment of older adults.

• Programs that adopt a community development approach engage the agents of change throughout. The Prince Edward Island example provided in this research demonstrated the value of this approach.

Develop and evaluate collaborative practice models that focus on the integration of older adult abuse with other forms of family violence across the lifespan.

• This research provides examples of collaborative models that examine family violence across the life course. These models are successful because they recognize that abuse is not age specific and awareness needs to occur at all ages and stages of the lifecourse. One participant noted his/her community organization aims to at counter ageist attitudes that young individuals have about older adults.

Examine current approaches to legislation, particularly alternatives to mandatory reporting policies.

Mandatory reporting policies are considered to be paternalistic in nature because
they impede the right to decision making. This practice disempowers older adults,
especially those whose competency is not in question. Legislation needs to
incorporate empowerment, involvement and a diverse choice of options for
different situations of older adult abuse and neglect.

REFERENCES

- Aitken, I., & Griffin, G. (1996). Gender issues in elder abuse. London, UK: Sage.
- Anderson, K. L. (1997). Gender, status, and domestic violence: An integration of feminist and family violence approaches. *Journal of Marriage and the Family*, 59(3), 655-669.
- Anetzberger, G. J. (1987). *The etiology of elder abuse by adult offspring*. Springfield, IL: Charles C. Thomas Publisher.
- Anetzberger, G. J., Korbin, J. E., & Austin, C. (1994). Alcoholism and elder abuse. *Journal of Interpersonal Violence*, 9(2), 184-193.
- Anooshian, L. J. (2005). Violence and aggression in the lives of homeless children: A review. *Aggression and Violent Behavior*, 10(2), 129-152.
- Aronson, J., Thornewell, C., Williams, K. (1995). Wife assault in old age: Coming out of obscurity. *Canadian Journal on Aging*, 14(2), 72-88.
- AuCoin, K. (2005). *Statistics Canada. Family violence in Canada: A statistical profile* 2005 (Statistics Canada No. 85-224). Ottawa, ON: National Clearinghouse on Family Violence.
- Barnett, O. W., Miller-Perrin, C. L., & Perrin, R. D. (2005). *Family Violence across the Lifespan*. Thousand Oaks, CA: Sage.
- BC Institute Against Family Violence. (2000). *Overview of family violence*. Retrieved May 07, 2008, from http://www.bcifv.org/about/overview/2.shtml
- Bengston, V. L., & Allen, K. R. (1993). The life course perspective applied to families over time. In P.G. Boss, W. J. Doherty, R. LaRossa, W. R. Scham, & S. K. Steinmetz (Eds.), *Sourcebook of families, theories and methods: A contextual approach* (pp. 469-499). New York, NY: Plenum.
- Boyack, V. (1997). Golden years: Hidden fears elder abuse. Calgary, AB: Kerby Centre.
- Bronfenbrenner, U. (1979). *The ecology of human development*. Cambridge, MA: Harvard University Press.
- Canadian Network for the Prevention of Elder Abuse (CNPEA). (2006). *Canadian laws on abuse and neglect*. Retrieved March, 01, 2008 from http://www.cleonet.ca/external_php?external_url=http://www.cnpea.ca/
- Campbell, A. (1993). *Out of control: Men, women and aggression*. London, UK: Pandora Press.

- Comack, E. (1996). Women in trouble: Connecting women's law violations to their histories of abuse. Halifax, NS: Fernwood Publishing.
- Connard, C., & Novick, R. (1996). *The ecology of the family*. Retrieved March 27, 2008, from http://www.nwrel.org/cfc/publications/ecology2.html
- Daro, D., Edleson, J., & Pinderhughes, H. (2004). Finding common ground in the study of child maltreatment, youth violence, and adult domestic violence. *Journal of Interpersonal Violence*, 19(2), 282-298.
- Desmarais, S. L., & Reeves, K. A. (2007). Gray, black, and blue: The state of research and intervention for intimate partner abuse among elders. *Behavioral Sciences and the Law*, 25, 377-391.
- DeKeseredy, W. (2006). Future directions. Violence Against Women, 12(11), 1078-1085.
- DeKeseredy, W., & Hitch, R. (2001). *Woman abuse: Sociological perspectives*. Toronto, ON: Thompson Educational Publishing.
- DeKeseredy, W., & Schwartz, M. (1998). Measuring the extent of women abuse in intimate heterosexual relationships: A critique of the conflict tactics scales. Harrisburg, PA: VAWnet, National Resource Center on Domestic Violence/Pennsylvania Coalition Against Domestic Violence.
- Dobash, R. P., Dobash, E., Wilson, M., & Daly, M. (1992). The myth of sexual symmetry in marital violence. *Social Problems*, *39*(1), 71-91.
- Duffy, A., & Momirov, J. (1997). *Family violence: A Canadian introduction*. Toronto, ON: James Lorimer & Company.
- Dutton, D., & Bodnarchuk, M. (2005). Through a psychological lens: Personality disorder and spouse assault. In D. R. Loseke, R. J. Gelles, & M. M. Cavanaugh (Eds.), *Current controversies on family violence* (pp. 5-18). Thousand Oaks, CA: Sage.
- Encel, S. (1995). Age dependency: Myths and realities. In S. Graham (Ed.), *Dependency, the life course and social policy*. Social Policy Research Centre: Reports and proceedings, No. 118. University of New South Wales, New South Wales, Australia.
- Finkelhor, D. (1983). Common features of family abuse. In D. Finkelhor, R. J. Gelles, G. T. Hotaling, & M. A. Straus (Eds.), *The dark side of families: Current family violence research* (pp.11-28). Newbury Park, CA: Sage.
- Flanzer, J. P. (2005). Alcohol and other drugs are key causal agents of violence. In D. R. Loseke, R. J. Gelles, & M. M. Cavanaugh (Eds.), *Current controversies on family violence* (pp. 163-173). Thousand Oaks, CA: Sage.

- Freedman-Melson, G. (1980). Family and environment: An ecosystem perspective. Minneapolis, MN: Burgess Publishing Company.
- Fulmer, T., Guadagno, L., Dyer, C. B., & Connolly, T. (2004). Progress in elder abuse screening and assessment instruments. Journal of the American Geriatrics Society, 52(2), 297-304.
- Gelles, R. (1974). The violent home: A study of physical aggression between husbands and wives. Newbury Park, CA: Sage.
- Gelles, R. J. (1979). Family violence. Beverly Hills, Sage.
- Gelles, R. J. (1980). Violence in the family: A review of research in the seventies. *Journal of Marriage and the Family, 42(2), 873-885.*
- Gelles, R. J. (1983). An exchange/social control theory. In D. Finkelhor, R. J. Gelles, G. T. Hotaling, & M. A. Straus (Eds.), The dark side of families: Current family violence research (pp.151-165). Newbury Park, CA: Sage.
- Gelles, R. J., & Cavanaugh, M. M. (2005). Association in not causation: Alcohol and other drugs do not cause violence. In D. R. Loseke, R. J. Gelles, M. M. Cavanaugh (Eds.), Current controversies on family violence (pp. 175-190). Thousand Oaks, CA: Sage.
- Gill, C. (2006). Understanding theories and their links to intervention strategies. In M. Rucklos Hampton, & N. Gerrard (Eds.), *Intimate Partner Violence* (pp. 47-66). Toronto, ON: Cormorant Books Inc.
- Glendenning, F. (1993). Learning in the third age. Ageing and Society, 14, 269-274.
- Gold, D. T, & Gwyther, L. P. (1989). The prevention of elder abuse: An educational model. Family Relations, 38, 8-14.
- Gordon, R. M., & Tomita, S. (1990). The reporting of elder abuse and neglect: Mandatory or voluntary? Canada's Mental Health, 1-6.
- Government of Canada. (1991). Elder abuse: Major issues from a National perspective. Ottawa, ON: Minister of Supply and Services Canada.
- Government of Canada (2007). Report of the National seniors council on elder abuse. Ottawa, ON: Minister of Human Resources and Social Development, Minister of Health, and the Secretary of State (Seniors).
- Hall, M. I. (2008, June). Constructing elder abuse: The Canadian legal framework. Paper presented at the Expert Roundtable on Elder Abuse, Ottawa, ON.

- Harbison, J., Coughlan, S. G., Downe-Wamboldt, B., Elgie, R. G., Melanson, P. M., & Morrow, M. (1995). *Mistreating elderly people: Questioning the legal response to elder abuse and neglect*. Halifax, NS: Dalhousie University.
- Harbison, J. (1999). The changing career of "elder abuse and neglect" as a social problem in Canada: Learning from feminist frameworks? *Journal of Elder Abuse & Neglect*, 11(4), 59-80.
- Harbison, J., & Morrow, M. (1998). Re-examining the social construction of 'elder abuse and neglect': A Canadian perspective. *Ageing & Society*, 18, 691-771.
- Hareven, T. K. (1995). Historical perspectives on the family and aging. In R. Blieszner, & V. H. Bedford (Eds.), *Handbook of aging and the family* (pp.13-31). Westport, CT: Greenwood Press.
- Hawranik, P., & McKean, E. (2004). The abuse of older adults: Issues and prevention strategies. In C. A. Ateah, & J. Mirwaldt (Eds.), *Within our research: Preventing abuse across the lifespan* (pp. 90-104). Winnipeg, MB: Fernwood Publishing.
- Health and Welfare Canada. (1993). *Community awareness and response: Abuse and neglect of older adults*. Ottawa, ON: Minister of Supply and Services Canada.
- Health Canada (1993). *Changing the landscape: Ending violence ~ achieving equality*. Ottawa, ON: Minister of supply and Services Canada.
- Health Canada. (2000). *Abuse and neglect of older adults: A discussion paper*. Ottawa, ON: The National Clearinghouse on Family Violence.
- Hudson, M. F. (1986). Elder mistreatment: Current research. In K. A. Pillemer, & R. S. Wolf (Eds.), *Elder abuse: Conflict in the family* (pp. 125-165). Dover, MA: Auburn House Publishing Company.
- Hudson, W., & McIntosh, S. (1981). The assessment of spouse abuse: Two quantifiable dimensions. *Journal of Marriage and the Family*, 43(4), 873-885.
- Humble, A. M., & Morgaine, C. (2002). Placing feminist education within the three paradigms of knowledge and action. *Family Relations*, 51(3), 199-205.
- Hutchings, N., & Hutchings, N. (1988). Violent family: Victimization of women, children & elders. Violent Family: Victimization of Women, Children & Elders, 201-201.
- Javed, N., & Gerrard, N. (2006). Bound, bonded and battered: Immigrant and visible minority women's struggle to cope with violence. In M. Rucklos Hampton, & N. Gerrard (Eds.), *Intimate partner violence* (pp. 33-46). Toronto, ON: Cormorant Books Inc.

- Jones, A. (1996). Domestic violence is not clearly defined. In A.E. Sadler (Ed.), Current controversies: Family violence (pp. 17-21). San Diego, CA: Greenhaven Press.
- Jouriles, E. N., McDonald, R., Norwood, W. D., & Ezell, E. (2001). Issues and controversies in documenting the prevalence of children's exposure to domestic violence. In S. A. Graham-Bermann, & J.L. Edleson (Eds.), Domestic violence in the lives of children: The future of research, intervention, and social policy (pp. 12-34). Washington, DC: American Psychological Association.
- Kelly, K. A. (2003). Domestic violence and the politics of privacy. Ithaca, N.Y.: Cornell University Press.
- Kelly, L. (1987). The continuum of sexual harassment: Comparison of the results of three different instruments. *International Review of Victimology*, 1, 231-239.
- Kemp, A. (1998). Abuse in the family: An introduction. Pacific Grove, CA: Brooks/Cole Publishing.
- Kincheloe, J., & MacLaren, P. (1994). Rethinking critical theory and qualitative research. In N. K. Denzin, & Y. Guba (Eds.), The handbook of qualitative research (pp. 138-157). Thousand Oaks, CA: Sage.
- Kosberg, J. I. (1988). Preventing elder abuse: Identification of high risk factors prior to placement decisions. The Gerontologist, 28(1), 43-50.
- Kosberg, J. I., & Nahmiash, D. (1996). Characteristics of victims and perpetrators and milieus of abuse and neglect. In L. A. Baumhorer, & S. C. Bell (Eds.), Abuse, neglect and exploitation of older persons: Strategies for assessment and intervention (pp. 31-50). Baltimore, MD: Health Professions Press.
- Kozma, A., & Stones, M. J. (1995). Issues in the measurement of elder abuse. In M. J. MacLean (Ed.), Abuse and neglect of older Canadians: Strategies for change (pp. 117-128). Toronto, ON: Thompson Ed. Publishers.
- Krug, E., Dahlber, L. L., Mercy, J. A., Zwi, A. B., & Lozano, R. (2002). World report on violence and health. Geneva: World Health Organization.
- Leroux, T. G., & Petrunik, M. (1990). The construction of elder abuse as a social problem: A Canadian perspective. International Journal of Health Services, 20(4), 651-663.
- Lewis, B. (1985). The wife abuse inventory: A screening device for the identification of abused women. Social Work, 30(1), 32-35.
- Little, L., & Kantor, G. (2002). Using ecological theory to understand intimate partner violence and child maltreatment. Journal of Community Health Nursing, 19(3), 133-145.

- Melson, G. F. (1980). Family and environment: An ecosystem perspective. Minneapolis, MN: Burgess.
- Mignon, S. I., Larson, C. J., & Holmes, W. M. (2002). Family abuse: Consequences, theories, and responses. Boston, MA: Allyn and Bacon.
- Mills, C. (1959). The sociological imagination. New York, NY: Oxford Press.
- Mohr, W. K., & Tulman, L. J. (2000). Children exposed to violence: Measurement considerations with an ecological framework. Advances in Nursing Science, *23*(1), 59-68.
- Murray, C. (2006). Controversy, constraints, and context: Understanding family violence through family systems theory. *The Family Journal*, 14(3), 234-239.
- National Clearinghouse on Family Violence (2003). Health effects of family violence. Fredericton, NB: Minister of Public Works and Government Services Canada.
- National Clearinghouse on Family Violence. (2004). *Intimate partner abuse against men*. Retrieved May 07, 2008, from http://www.phac-aspc.gc.ca/ncfv-cnivf/ familyviolence/pdfs/fv-intime_e.pdf
- National Clearinghouse on Family Violence. (2007). The family violence initiative. Retrieved March 27, 2008, from http://www.phac-aspc.gc.ca/ ncfv-cnivf/familyviolence/initiative e.html
- Nova Scotia Health (2004). Adult protection act: Discussion paper. Retrieved March 01, 2008, from http://www.gov.ns.ca/health/ccs/response.pdf
- Pillemer, K., & Suitor, J. J. (1992). Violence and violent feelings: What causes them among family caregivers? Journal of Gerontology, 47, 165-172.
- Phillips, L. R. (1986). Theoretical explanations of elder abuse: Competing hypotheses and unresolved issues. In K. A. Pillemer, & R. S. Wolf (Eds.), *Elder abuse*: Conflict in the family (pp. 197-217). Dover, MA: Auburn House Publishing.
- Podnieks, E., Pillemer, K., Nicholson, J., Shillington, T., & Frizzel, A. (1990). *National* survey on abuse of the elderly in Canada. Toronto, ON: Ryerson Polytechnical Institute.
- Public Health Agency of Canada (2005). Family violence in Aboriginal communities: An Aboriginal perspective. Retrieved May 07, 2008, from http://www.phac-aspc.gc.ca/ncfv-cnivf/familyviolence/html/fvabor_e.html
- Rathbone-McCuan, E. (1980). Elderly victims of family violence and neglect. Social Casework, 61(4), 296-304.

- Reis, M., & Nahmiash, D. (1998). Validation of indicators of abuse (IOA) screen. The
- Roberto, K. A., Teaster, P. B., & Duke, J. O. (2004). Older women who experience mistreatment: Circumstances and outcomes. Journal of Women & Aging, 16(1/2), 3-15.

Gerontological Society of America, 38(4), 471-480.

- Rodriguez, E., Lasch, K. E., Chandra, P., & Lee J. (2001). The relation of family violence, employment status, welfare benefits, and alcohol drinking in the United States. Western Journal of Medicine, 174(5), 317-323.
- Schiamberg, L., & Gans, D. (1999). An ecological framework for contextual risk factors in elder abuse by adult children. Journal of Elder Abuse & Neglect, 11(1), 79-103.
- Schofield, M. J., & Mishra, G. D. (2003). Validity of self-report screening scale for elder abuse: Women's health Australia study. The Gerontologist, 43(1), 110-120.
- Shugarman, L. R., Fries, B. E., Wolf, R. S., Morris, J. N. (2003). Identifying older people at risk of abuse during routine screening practices. Journal of American *Geriatrics Society*, 51, 24-31.
- Smith, D. E. (1987). The everyday world as problematic. Toronto, ON: University of Toronto Press.
- Spencer, C. (1995). New directions for research on interventions with abused older adults. In M. J. MacLean (Ed.), Abuse & Neglect of Older Canadians: Strategies for Change (pp. 143-155). Toronto, ON: Thompson Educational Publishing, Inc.
- Statistics Canada. (2000). Family violence in Canada: A statistical profile 2000 (Statistics Canada No. 85-224). Ottawa, ON: National Clearinghouse on Family Violence.
- Statistics Canada. (2005). Family violence in Canada: A statistical profile 2005 (Statistics Canada No. 85-224). Ottawa, ON: National Clearinghouse on Family Violence.
- Statistics Canada. (2007). Transition homes in Canada: National fact sheet. Retrieved July 3, 2008, from http://www.statcan.ca/English/freepub/85-XIE/2007000/ national-en.htm
- Stones, M. J. (1995). Scope and definition of elder abuse and neglect in Canada. In M. J. MacLean (Ed.), Abuse & Neglect of Older Canadians: Strategies for Change (pp. 111-115). Toronto, ON: Thompson Educational Publishing, Inc.
- Straus, M. A. (1979). Measuring intro-family conflict and violence: The conflict and antics (CT) scales. Journal of Marriage and the Family, 75-88.

- Straus, M. A. (1980). Wife-beating: How common and why?. In M. A. Straus, & G. T. Hotaling (Eds.), The social causes of husband-wife violence (pp. 23-38). Minneapolis, MN: Library of Congress Cataloguing in Publication Data.
- Straus, M. A. (1983). Ordinary violence, child abuse, and wife-beating: What do they have in common? In D. Finkelhor, R. J. Gelles, G. T. Hotaling, & M. A. Straus (Eds.), The dark side of families: Current family violence research (pp. 213-234). Newbury Park, CA: Sage.
- Thompson, M. P., & Kingree, J. B. (2006). The role of victim perpetrator alcohol use in intimate partner violence outcomes. Journal of Interpersonal Violence, 21(2), 163-177.
- Tolan, P., Gorman-Smith, D., & Henry, D. (2006). Family violence. Annual Review of Psychology, 57(1), 557-583.
- Vinton, L. (1991). Abused older women: Battered women or abused elders? *Journal of* Women and Aging, 3(3), 5-19.
- Vinton, L. (2001). Violence against older women. In C. M. Renzetti, J. L. Edleson, & R. K. Bergen (Eds.), Sourcebook on violence against women (pp. 179-192). Thousands Oaks, CA: Sage.
- Wahl, J. A., & Purdy, S. (1991). Elder Abuse: The Hidden Crime. Advocacy Centre for the Elderly & Community Legal Education Ontario. Toronto, ON: Advocacy Centre for the Elderly and Community Legal Education Ontario.
- Walsh, C. A., Ploeg, J., Lohfeld, L, Horne, J., MacMillan, H., & Lai, D. (2007). Violence across the lifespan: Interconnections among forms of abuse and described by marginalized Canadian elders and their care-givers. British Journal of Social Work, 37, 491-514.
- Walker, G. A. (1990). Family violence and the women's movement: The conceptual politics of struggle. Toronto, ON: University of Toronto Press.
- Waltermaurer, E. (2005). Measuring intimate partner violence (IPV): You may only get what you ask for. Journal of Interpersonal Violence, 20(4), 501-506.
- Wolf, R., Daichman, L., & Bennett, G. (2002). Abuse of the elderly. In E. G. Krug, L. L. Dahlber, J. A. Mercy, A. B. Zwi, & R. Lozano (Eds.), World report on violence and health (pp.125-145). Geneva, CH: World Health Organization.
- Wolf, R. (2003). Elder abuse and neglect: History and concepts. In R. J. Bonnie, & R. B. Wallace (Eds.), Elder mistreatment: Abuse, neglect, and exploitation in an aging America (pp. 238–248). Washington, DC: National Academies Press.
- World Health Organization (WHO) (2002). In E. G. Krug, L. L. Dahlberg, J. A. Mercy,

- A. B. Zwi, & R. Lozano (Eds.), *World report on violence and health.* Geneva, CH: WHO Publication.
- Yllö, K. (2005). Through a feminist lens, gender, diversity, and violence: Extending the feminist framework. In D. Loseke, R. Gelles, & M. Cavanaugh (Eds.), *Current controversies on family violence* (pp. 19-34). London: Sage.
- Young, I.M. (1990) The politics of difference. Princeton, NJ: Princeton University Press.

APPENDIX A

Focus Group Organizations

Ad Sum House

Alice Housing

Bayers Westwood Family Support Services

Caregivers Nova Scotia

Dartmouth Seniors' Service Centre

Elizabeth Fry Society

Family Services Association

Naomi House

Nova Scotia Advisory Council on the Status of Women

Nova Scotia Adult Protection Services

Nova Scotia Department of Health, Continuing Care Division

Nova Scotia Department of Seniors

Nova Scotia Immigrant Settlement Association

RCMP, Domestic Violence Division

Victoria Order of Nurses (VON)

APPENDIX B

Key Informant Interviews

Rona Brown, Director, Child and Family Services (Former Coordinator of Premier's Action Committee on Family Violence Prevention) Prince Edward Island

Barbara Cottrell, Independent Consultant, Meta Research and Communications, Halifax, Nova Scotia

Susan Crichton, Elder Abuse Consultant, Manitoba Seniors and Healthy Aging Secretariat, Manitoba

Brenda Hill, Director, Kerby Centre and Kerby Rotary House, Calgary, Alberta

Lisa Manuel, Manager, Seniors and Caregivers Support Service Unit, Family Service Association of Toronto, Ontario

Charmaine Spencer, Research Associate, Gerontology Research Centre, Simon Fraser University, British Columbia