NCEA National Center on Elder Abuse

What Public Health Students Need to Know About Elder Abuse

As a public health student promoting the health and safety of your community, you will be in a unique position to help prevent elder abuse.

What is Elder Abuse?

Elder abuse (EA) is an intentional act or failure to act that causes or creates a risk of harm to an older adult. Common types of elder mistreatment include physical, sexual, emotional/psychological, or financial abuse, neglect, or self-neglect. Multiple forms of mistreatment can co-occur.

Elder Abuse is a Public Health Issue

EA is a critical public health (PH) issue that can lead to injuries, disabilities, and reduction in quality of life. EA intersects numerous PH concerns such as social isolation, psychological conditions, dementia, and the opioid crisis. Addressing EA requires population-level solutions.

Burden to the Healthcare System

$5.3 Billion

EA has a significant economic impact on the healthcare system with an estimate of **$5.3 billion annually in direct medical costs**.

Did You Know?

1 in 10 community-dwelling older adults experiences abuse every year.

1 in 3 older adults with cognitive impairment experiences abuse

Only **1 in 24** cases of elder abuse is reported.

Signs of Elder Abuse

Since individuals experience harm in different ways, look for atypical changes in the following domains.

Physical

- Malnutrition, dehydration, or unexplained weight loss
- Sudden mental status changes unrelated to advancing dementia
- Uncontrolled pain despite pharmacological treatment
- Uncontrolled conditions such as hypertension, heart failure, asthma, or diabetes
- Inadequately explained bruises, lacerations, abrasions, fractures, or pressure ulcers
- Injury to genital area or unexplained sexually transmitted infections

Psychological/Emotional

- Unusual changes in behavior or sleep
- Increased fear or anxiety
- Isolation from friends or family or withdrawal from normal activities

Financial

- Unpaid bills and fraudulent signatures on financial documents
- Unusual or sudden changes in spending patterns, will, or other financial documents

Social

- Patient discomfort in the presence of family member/caregiver
- Caregiver resistance to the patient being seen alone
- Caregiver is disengaged, inattentive, overly anxious, or hovering
- Caregiver expresses frustration, anger, or burden related to caregiving

Environmental

- Unsanitary living conditions or unsafe environment
- Evidence of self-neglect, including poor diet, poor hygiene, and unattended medical needs

Risk Factors

Risk factors can be organized using the socio-ecological model across individual, relationship, community and societal levels.

Societal

- Poor legal protections for older adults
- Lack of funding for aging services and abuse prevention programs
- Inadequate staffing and training in long-term care facilities

Community

- Community and cultural norms
- Lack of access to community resources

Relationship

- Economic and/or emotional dependency
- Poor quality relationship, past family conflict

Individual

- Social isolation
- Medical or psychological conditions and/or cognitive impairment
- Frailty and/or functional deficits
- Stress and poor coping mechanisms
- Substance abuse

Social Determinants of Health

(SDOH) are the conditions in which people are born, grow, work, live, and age. SDOH, such as income, social isolation, experiences of ageism, transportation, and housing, impact the quality of an older adult's life and their risk of abuse.

Ageism

Ageism across ecological levels has been associated with poor health outcomes globally. **It is linked to $63 billion in annual healthcare expenses**.

Impacts of Elder Abuse

Elder abuse has significant **medical, mental health, financial, and social impacts**.

Elder abuse occurs across all **cultures, contexts, and communities**.

Older adults who are abused have a **3x higher risk of death** compared to those who have not been mistreated

Reporting Resources

Public health professionals may be legally required to report known or suspected abuse. In cases of imminent harm, report to law enforcement. Report abuse in the community to Adult Protective Services. Report concerns in facilities to the Long-Term Care Ombudsman. Local reporting and community resources can be accessed through Eldercare Locator at **1-800-677-1116** or visit **eldercare.acl.gov**.

Steps You Can Take

- Learn about EA, how it occurs, and local reporting resources
- Read professional literature and/or conduct research regarding EA
- Organize or participate in EA prevention education and awareness activities, such as community workshops or public awareness campaigns
- Volunteer or intern at agencies that serve older adults and caregivers
- Explore **age-friendly movements**, including **age-friendly public health systems**, that support older adults' health, well-being, and ability to age in place, and their role in preventing EA

Don't stand by, stand up to elder abuse. You can make a difference.

Keck School of Medicine of USC

For more information: **ncea.acl.gov**

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This publication was supported by the Administration for Community Living (ACL), U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling $1,000,000 with 100 percent funding by ACL/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by ACL/HHS or the U.S. Government. Document Revision: December 2025