

# Are Adverse Childhood Experiences Associated With Greater Risk of Elder Abuse Victimization?

## Summary

Research has shown that adverse childhood experiences (ACEs) are associated with violence in later life, but evidence has been limited regarding their connection to elder abuse and neglect. The goal of this study was to examine the prevalence of, and associations between, ACEs and elder abuse victimization. In their study exploring the link between ACES and elder abuse, authors Chen and Fu found that elder abuse victimization correlated significantly with socioeconomic difficulty in childhood, frequent physical punishment by parents, and having a history of at least four ACEs.<sup>1</sup>

#### Methods

The team used data from a cross-sectional interview survey conducted in 2019 of 1,002 adults aged 65 and older living in Beijing, China. The researchers measured ACEs and elder abuse victimization using study participants' retrospective self-reporting, and examined the associations between ACEs and elder abuse victimization using univariate and multivariate logistic regressions. Their theoretical framework for understanding the results was based on a life-course perspective of human development.

### Results

- Among study subjects, the mean number of ACEs was 3.6, and
   7.3% had experienced at least one type of elder abuse.
- Five types of ACEs correlated significantly with higher reports of elder abuse victimization: socioeconomic difficulty, starvation, parental divorce, frequent quarrels between parents, and frequent physical punishment by parents.
- After testing these five types of ACEs in the multivariate regression model, the authors found that only two types correlated significantly with elder abuse victimization: socioeconomic difficulty, and frequent physical punishment by parents.
- Having multiple (at least four) ACEs was also found to be a risk factor for elder abuse victimization.



## **Key Takeaways**

- The study found that elder abuse victimization correlated significantly with socioeconomic difficulty in childhood, frequent physical punishment by parents, and having at least four adverse childhood experiences.
- The results suggest that childhood victimization may increase vulnerability to violence in later life, and highlight the need for better understanding of ACEs and their effects across the life course.

#### Limitations

- The study used a cross-sectional design, and thus cannot establish causality between ACEs and elder abuse victimization.
- The study relied on retrospective self-reported data, which may be vulnerable to recall bias, social desirability bias, and fallible memory.
- Study participants all lived in Beijing, which may limit the generalizability of the study's findings to the rest of China, or to other countries.
- Each type of ACE and elder abuse victimization experience was based on a single selfreported item, without examining the quality, severity, or chronicity of these experiences.

# **Implications for Practice and Research**

Screening older adults for a history of ACEs can help practitioners understand risks and causes of potential health problems including elder abuse victimization. Efforts to prevent or reduce ACEs, or to enhance coping skills with those with a history of ACEs, may help prevent victimization in later life. To better understand the relationship between childhood abuse and later-life victimization, future research should explore moderating or mediating factors that impact the relationship.

Special thanks to Keck School of Medicine of USC Department of Family Medicine Resident Devin Beecher, MD for his work on this translation and Resident Director Joanne Suh, MD, for her support and contributions.



Keck School of Medicine of USC

This research translation was completed for the National Center on Elder Abuse and is supported in part by a grant (No. 90ABRC0002-02-00) from the Administration on Aging, U.S. Department of Health and Human Services (HHS). Grantees carrying out projects under government sponsorship are encouraged to express freely their findings and conclusions. Therefore, points of view or opinions do not necessarily represent official Administration on Aging or HHS policy. LAST REV. MAR 2023