

Domestic Violence Service Users: A Comparison of Older and Younger Women Victims

Marta Lundy · Susan F. Grossman

Published online: 24 April 2009
© Springer Science + Business Media, LLC 2009

Abstract No one, young or old, is immune to interpersonal violence (IPV). Female victims come from a variety of circumstances and across all ages. However, much of the research and services have focused almost exclusively on younger women. This article compares women 65 and older to women under 65, who utilized domestic violence (DV) services in a mid-western state over a five-year period. Although there are many similarities in the findings, differences include that older victims were more likely to be White, report more emotional and less physical abuse, be referred to services by a legal source, have special needs or disabilities, and receive fewer services, less service hours and fewer contacts than younger victims utilizing DV services. Implications for research and practice are discussed.

Keywords Domestic violence interpersonal violence · Elder abuse · Domestic violence shelters · Adult protective services · Department on Aging

Introduction

Interpersonal violence is a social problem of epidemic proportions. Approximately 1.5 million women are raped and/or physically assaulted by a current or former spouse, cohabiting partner, or date at least once annually. If repeat victimization, which is common, is taken into account, this figure jumps to 4.8 million (Tjaden and Thoennes 2000,

p. iii). Of the roughly 3.5 million violence crimes committed against family members between 1998 and 2002, roughly 49% were crimes against spouses, and approximately 68% of those individuals who have been physically abused also report sexual abuse (Durose et al. 2005, p.1; McFarlane & Malecha 2005).

Interpersonal violence is typically seen as a problem for women under 65, which is substantiated by research indicating that violence against women decreases with age (O'Donnell et al. 2002, p. 1252). However, data from the Administration on Aging suggests that approximately half a million older adults, the majority of whom are women, after controlling for their greater representation among the older adults, were victims of some type of domestic abuse or neglect in 1996 (Administration on Aging 2007).

Until more recently, works examining the problems and needs of victims of interpersonal violence have not focused on older victims, particularly in relation to intimate partner violence, although this type of abuse is clearly a problem for some older women (Acierno et al. 2001; Speltz and Raymond 2000). For example, Rennison and Rand (2003), in a study across 9 years of crime data, found that abused women aged 55 and older comprised only a small proportion of all women who were victims of intimate partner violence compared to other age cohorts (only 2%), yet of this 2%, almost two thirds or 62%, involved violence by a current spouse (p.1419). Similarly, a survey of all 50 states, including the District of Columbia and Guam, completed by the National Association of Adult Protective Services Administration, found that slightly more than 100,000 of 472,813 reports of abuse, or about only 20%, involved victims of interpersonal violence who were aged 60 or older. However, 56% of those were women victims, with 30% of the perpetrators reported as spouses or intimate partners (Teaster 2000, p.28; Wilke and Vinton 2005,

Marta Lundy and Susan F. Grossman contributed equally.

M. Lundy (✉) · S. F. Grossman
Loyola University Chicago, School of Social Work,
820 N. Michigan Avenue,
Chicago, IL 60611, USA
e-mail: mlundy@luc.edu

p.317). In another review of studies from 1988 to 2000, Brandl and Cook-Daniels (2002) found that in cases reported to adult protective services, there was more often an adult child rather than a spouse who committed the abuse. Nonetheless, Brandl and Cook-Daniels note that in studies using random samples as well as studies completed on domestic violence services, researchers found more spouse/partner abuse than abuse committed by adult children (Brandl and Cook-Daniels 2002). According to the review, there were many limitations in the methodology of the individual studies as well as in the comparison of the data, but the review presents a pattern of findings that needs to be studied in greater detail.

Despite the realization that older individuals comprise a prominent proportion of abuse victims, and that at least some of the abuse experienced by older adults, particularly older women, is intimate partner violence grown old (Brandl and Raymond 1997; Pillemer and Finklehor 1988; Podnieks 1992; Speltz and Raymond 2000; Wilke and Vinton 2005; Wisconsin Coalition Against Domestic Violence 1996), older victims do not typically receive services through the same service system which assists younger victims of domestic violence (DV). Indeed, as noted in previous work (Lundy and Grossman 2004) starting at about age 50, women no longer seem to access domestic abuse services and it is unusual for older women to go to DV shelters, although certainly some do (Wisconsin Coalition Against Domestic Violence 1996). Instead, more often both males and females who are 60 and over, are steered into the adult protective service system. While this system was developed to assist and protect seniors who are victims of abuse and neglect, as Straka and Montminy (2006) summarize, in an excellent overview, it operates under a different set of assumptions and paradigms related to the causes of violence and appropriate interventions compared to the DV service system.

Straka and Montminy (2006), note that domestic violence was identified as a problem by women themselves and conceptualized in feminist terms (p. 253). Under this paradigm, violence is seen as a social problem, related to the structure of society and unequal social, gender or power relations. DV is primarily seen as a problem of violence against women by men. In contrast, Straka and Montminy note that older adults have had “virtually no input into defining the problem of elder abuse. Although woman abuse was defined by women themselves, elder abuse has been defined by health care professionals, primarily those working in geriatric and home care services, hospitals, and other health care settings where large numbers of older adults are found” (p. 259).

Straka and Montminy also talk about the differences in the solutions given to the different conceptualizations of the problem. Since DV was seen as a structural problem, the

solution required a response at two different levels: the social or political and the personal (p. 254). Thus, legal recourse and laws protecting women are critical as is immediate help, most often in the form of shelter. In contrast, the response to the abuse of older adults was based on a child protection model; the focus is on identifying risk and vulnerability. This contrasts with the focus on gender and power dynamics evident in the DV paradigm. Interventions related to the abuse of older adults tend to focus on protection and the provision of services which in part are intended to reduce caregiver stress and provide protection to frail older adults. Straka and Montminy also point out that only recently has DV been seen as a possible form of abuse when considering elder abuse. Despite such differences, it is important to note that over the past several years, there has been significant movement toward interdisciplinary collaboration between the two systems. (see NCEA web page identifying DV among older adults and links to DV resources, www.elderabusecenter.org).

While previous works (Grossman and Lundy 2003; Lundy and Grossman 2004) have examined experiences of older victims of violence who use DV services and compared the characteristics to national data on individuals in the adult protective service system, few works have sought to discover if differences exist related to older and younger victims of violence who utilize DV services (for exceptions see Wilke and Vinton 2005). Yet, an examination of differences between older and younger women who utilize services for victims of interpersonal violence, specifically DV services would facilitate an understanding of the ways in which this service system might be more responsive to the needs of both of these victim cohorts.

Accordingly, the current article compares demographic characteristics, the relationship to the abuser, types of abuse, referral source, and service experiences of women 65 and older to those of women under 65, who utilized services from all DV programs in a mid-western state over a five-year period. Our intent is that this exploration may help increase our understanding of the ways the DV service system might be more responsive to the needs of both of these victim cohorts.

Method

The data for this study were collected from nearly 70 DV centers throughout Illinois that receive funding from either the Illinois Coalition Against Domestic Violence (ICADV, available at: www.ilcadv.org) or the Illinois Department of Human Services (DHS). The Illinois Criminal Justice Information Authority (ICJIA, available at <http://www.icjia.org/public>) maintains the system utilized by these centers to collect the information, known as InfoNet (Information

Network). This is a web-based data collection system that is used by victim service providers in Illinois to provide data on clients, services, and education and advocacy efforts of agencies (ICJIA, July, 2004). The development and implementation of the network was the result of collaborative efforts between the Illinois Coalition Against Sexual Assault (ICASA) and the Illinois Coalition Against Domestic Violence (ICADV), and instituted in 1997 after obtaining additional monies from the Victims of Crime Act (VOCA) to implement the system statewide. The first full year of service data were collected in 1998.

The InfoNet system is set up to collect information about client demographics including gender, race/ethnicity, age at the time of first service contact, education, income sources, employment, health insurance information, marital status and special client needs or disabilities requiring additional assistance. It also includes information about clients' primary presenting issues, client interactions related to the abuse with the medical, police and legal systems, and service contacts. Information on referral sources to and from the programs is collected as well as data on children who enter the system with the DV victim and the services they receive.

Every agency has at least one person who is trained on InfoNet and they are responsible for training other users before new users can begin entering information into the system. Quarterly New User Training sessions as well as semi-annual advanced trainings (or more as needed), are available for those who use the system each year.

The Current Study

The analysis presented here focuses on clients who were served between January 1, 1998 and December 11, 2005. A total of 466,629 individuals (victims and children) received services during this period. However, of this total, 124,166 or 26 % were served in more than 1 year. The actual unduplicated count of clients was 342,462. This represents all clients (both victims and children) served at least once by one of the 70 agencies serving victims of violence in the state during this time period.

The present analysis includes only female victims¹ who were 18 or older. Of this total, 243,724 (99%) were between the ages of 18 and 64 while 2,746 (1%) were 65 or older. We restricted the analysis to female victims because most literature and empirical studies, particularly related to DV, include only females. Further, different dynamics may be

¹ We do note, however, that there were differences in the proportion of older victims between men and women. For males, 5% of those about whom we had age information were over 65 (640 of 13,006 male victims about whom there was age data). For females, only 1% was in this age group (2746 of 252,007 females about whom we had age data)

involved when men are victims and we believed that analysis of gender differences warranted its own study.

Because the number of female service users between the ages of 18 and 64, was much larger than the number of female victims 65 and older who utilized services, we equalized the number of individuals in each group which would better support the statistical analyses. The total population of older female victims ($N=2,746$) was compared to a smaller sample of women who were 18 to 64 ($N=2,500$) that was randomly selected from the larger population of victims in this age group. We used the survey select function of our analysis program (SAS Institute 2002-2003) to accomplish this. The resulting sample of 2,500 individuals represented about 1% of all individuals from the larger population of female service users in this age group. The sample was quite similar to the population of service users between the ages of 18 and 64 in terms of age, race/ethnicity, educational and marital status (see Appendix Table 8 for a comparison of the demographic traits of the total population of female service users between the ages of 18 and 64 to the sample used in the present analysis).

One further restriction was made to derive the final data set for the analysis presented here. Although there was service data of some sort for all individuals, information about total hours was missing for 5 of the 2,500 individuals in the younger age group and 6 of the 2,746 individuals who were 65 and older. These individuals were excluded from all analyses so that the final sample included only those individuals for whom data on service hours was complete. The resulting sample then consists of 2,495 women between the ages of 18 and 64 and 2,470 women who were 65 and older. All were victims of some type of domestic abuse and all received services related to this abuse. The average age for those in the younger age group was 32.8 ($S.D.=9.74$) years while the average age for those 65 and older was 72.5 ($S.D.=6.45$).

Analysis

The analysis involves a comparison of individuals 18 to 64 and those 65 and over related to their basic demographic characteristics, the relationship between the client and abuser, the primary type of abuse, and the source of referral to services. In addition, we provide data on the proportion of individuals in each group receiving the various services, the average number of service hours provided, and the total hours of service per person across all services for each group. Data on the total number of service contacts per person and the average number of different services received are included as well. Overall, there are 31 different services about which data are collected by the InfoNet system. Two of these are specifically for children so they were not included here. Other services, which reflect

similar types of assistance, are combined for ease of presentation. These are noted in the relevant tables.

In determining the age to use as the cut off between older and younger adults, we were faced with a difficult decision, because there does not seem to be consensus on what constitutes the appropriate age. For example, different policies affecting older persons use different ages to determine older adult status. The Older Americans Act (1965; 2007) defines older adults as persons age 60 and older (Administration on Aging 2007) as does the Illinois Department on Aging (2007). To further complicate the issue, in an article the authors published in 2004, in the *Journal of Elder Abuse & Neglect*, 16(1–5), the official journal of the National Committee for the Prevention of Elder Abuse, the editor(s) requested that we use age 65 and older to refer to older adults. We therefore decided to continue to use age 65, to maintain consistency across our own publications. We also note that although this is changing, currently, full social security retirement benefits are available to individuals once they reach 65 years of age (although partially available at age 62).

While it might have been interesting to look at a variety of age groups, the focus of this article is on differences between older victims and women who were under 65, in part because few articles look at older victims who are using domestic violence services and how they compare to younger victims. There are most likely differences among women of different age cohorts who are under 65 (see Rennison and Rand 2003, for example). However, we believe that adding more age groups for comparative purposes would detract from the concentration of this analysis on the differences in services for older and younger victims at DV agencies.

Although we reduced the number of individuals included in the analysis, the total sample is still quite large at over 5,000 people. As a result, and because chi-square is sensitive to large sample size, we report as statistically significant only those differences which attain significance at an alpha of .0001 or less.

Results

Demographic Characteristics

Table 1 presents demographic data on older and younger clients. While most clients in both groups are White, the data indicate that clients under 65 are significantly less likely to be White, $X^2(1, N=5,127)=113.11, p \leq .0001$, compared to clients 65 and older who entered the service system. Conversely, clients under 65 are significantly more likely to be Hispanic, $X^2(1, N=5,127)=145.60, p \leq .0001$, and African American, $X^2(1, N=5,127)=15.49, p \leq .0001$,

although the proportions of individuals in each age group who are African American is somewhat comparable (at 27% for those under 65 and 22% among those 65 and older). Very slight variations, if any, exist between the groups related to the percent who are Asian American, American Indian, Bi-racial, or in an “other” racial group.

Data on education indicate that older women are significantly more likely to have less than a high school education, $X^2(1, N=4,026)=38.08, p \leq .0001$, and less likely to have graduated high school or completed some college, $X^2(1, N=4,026)=26.75, p \leq .0001$, compared to women in the younger age group. The groups are comparable, however, related to the proportions who have graduated from college (about 10% to 11%).

While information on income is missing for many individuals, data presented here indicate that about half of all women between the ages of 18 and 64 who obtain services receive some income from work while only 14% of women who are older than 64 have income from employment, $X^2(1, N=4,805)=849.09, p \leq .0001$. In contrast, almost three quarters of all women in the older age group receive some income from a government program (of the 1,799 women in the older age group who receive public funds, about 87% are from Social Security and about 15% are from Supplemental Security Income) compared to only 14% of those in the younger age group $X^2(1, N=4,805)=1,614.31, p \leq .0001$. Both programs provide support to older adults as well as people with disabilities. Less than 1% of older victims receive income from programs that provide support to women with children such as Temporary Assistance to Needy Families (TANF). On the other hand, only about 19% of the 331 women who receive some public funds among those 18 to 64 obtain social security. Thirty-six percent receive Supplemental Security Income, suggesting they might have some type of disability or have a child who is disabled, and another third (about 34%) receive money from TANF.

Clear differences are also evident related to marital status. First, a significantly greater proportion of clients under 65 are single, $X^2(1, N=4,944)=719.30, p \leq .0001$. Second, although the difference between the groups is smaller, younger women are also significantly more likely to be married when they come into service, $X^2(1, N=4,944)=25.85, p \leq .0001$. In contrast, less than one percent of all clients under 65 are widowed compared to almost 40% of those 65 and older $X^2(1, N=4,944)=1,127.69, p \leq .0001$. Similar proportions of women in both groups are divorced or separated (15% for both groups) and in common law relationships (0.3% for both groups).

Finally, data on language barriers and disabilities indicate that the groups are similar as to language challenges. As we might expect, the older age group have a greater proportion who have some type of disability or special need, $X^2(1, N=5,235)=128.90, p \leq .0001$. These special needs include an

Table 1 Basic Demographics of victims by age group (female victims only)

Variable	Individual is 18 to 64	Individual is 65 or Older
Total number of clients in selected group	(2,495)	(2,740)
CLIENT DEMOGRAPHICS		
Race (Total number included in analysis)	(2,439)	(2,688)
% White	55.2	69.6*
% African American	27.1	22.3*
% Hispanic	14.6	4.8*
% Asian American	1.5	2.2
% American Indian	0.2	0.3
% Bi-racial	0.8	0.1
% Other race	0.6	0.7
Education (total number included in analysis)	(2,040)	(1,986)
% Less than high school graduate	23.9	32.7*
% High school graduate or some college	64.9	56.9*
% Who completed college	11.2	10.4
Income sources (total number included in analysis)	(2,306)	(2,499)
% Public income sources as primary or secondary source	14.3	72.0*
% Employment as primary or secondary source	53.3	13.8*
Marital status (total number included in analysis)	(2,392)	(2,552)
% Single	37.6	6.3 *
% Currently married	45.8	38.7 *
% Divorced or separated	15.4	15.1
% Widowed	0.9	39.8 *
% Common law	0.3	0.3
% With language challenge (total number included in analysis)	(2,495) 7.7	(2,740) 5.2
% With special needs requiring special attention (total number included in analysis) ^a	(2,495) 5.8	(2,740) 15.6 *

*For differences between groups, $p \leq .0001$

^a These include an ADL problem, a visual problem, deafness or impaired hearing, a need for wheelchair accessibility, developmental disabilities, immobility, special dietary needs, or need for assistance administering medications

ADL problem, a visual problem, deafness or impaired hearing, a need for wheelchair accessibility, developmental disabilities, immobility, special dietary needs, or need for assistance administering medications.

Types of Abuse and Relationship of Abuser to Client

Table 2 contains information about the primary presenting type of abuse recorded in the InfoNet data ² and the location of the offense. Among younger victims, 64% had physical abuse as the primary type of abuse, while 34% were primarily victims of emotional abuse. Only about 2% had sexual abuse as their primary presenting problem. For older victims, the pattern was somewhat different. Slightly less than half of all older victims had physical abuse as their

primary problem (49%) while another 50% were primarily victims of emotional abuse. Less than 1% had sexual abuse as their primary problem. Differences between the groups related to the proportion who had physical abuse, $X^2(1, N=5,015)=119.90, p \leq .0001$, and emotional abuse, $X^2(1, N=5,015)=138.35, p \leq .0001$, as their primary presenting problems were statistically significant.

Information on the location of the offense indicates that most victims, regardless of age, were victimized in their own homes; 88% of all older women and 78% of younger women were victimized in this location, $X^2(1, N=4,479)=94.47, p \leq .0001$. Younger women were significantly more likely to be victimized in the offender’s home (10% versus 5%), $X^2(1, N=4,479)=58.53, p \leq .0001$. Smaller proportions of victims in both groups were victimized in public or private places.

Table 3 provides information regarding the relationship between the client and the alleged abuser. Data indicate that older clients in the DV service system were significantly less likely to report that their abuser was a current or former

² It is important to note that only one type of abuse could be listed as primary in the database. Unfortunately, data on other types of abuse that were secondary, while captured by the InfoNet system, were not available for purposes of analysis

Table 2 Presenting issues and severity of abuse by age of the victim

Variables	Victim is 18 to 64	Victim is 65 and Older
(Number included in analysis)		
PRIMARY PRESENTING ISSUE	(2,388)	(2,627)
% Physical abuse	64.2	48.9*
% Sexual abuse	1.8	0.8
% Emotional abuse	33.9	50.4*
OFFENSE LOCATION	(2,097)	(2,382)
% Public place ^a	5.1	3.2
% Private place ^b	4.5	2.8
% Other location	2.3	1.0
% Offender's home	10.4	4.5*
% Victim's home	77.7	88.5*

*For differences between groups, $p \leq .0001$

^a Includes street, park, school or other public location

^b Includes car or other private location

husband (slightly more than one quarter, 27%), or a current or former boyfriend (5%) whereas almost half of all women under 65 were allegedly abused by a current or former husband (47.0%), $X^2(1, N=4,987)=215.15, p \leq .0001$, or a current or former boyfriend compared to those 65 and older (41% versus 5%), $X^2(1, N=4,987)=879.65, p \leq .0001$. On the other hand, almost 60% of those 65 and older were significantly more likely to report that they had been abused by a male or female relative, compared to only 5% of all clients 65 and under. Although the difference is less startling, older service users were also significantly more likely to report that their abuser was a male acquaintance compared to those under 65 (1% versus 0.4%), $X^2(1, N=4,987)=15.08, p \leq .0001$. There were only very small differences between the groups related to the proportion who reported that they were abused by a father or mother, male or female friend or a female acquaintance.³ Very few service users in either group were in these categories.

Data on the demographic characteristics of the abuser indicate that for the younger group, almost all the abusers were male, reflecting the small proportion of abusers listed in the female relationship categories. Male offenders clearly outnumbered females among those in the older age group, but about one fifth were female $X^2(1, N=5,013)=315.27, p \leq .0001$. As the data suggests, this is explained by the large proportions of female relatives among the abusers of older women.

The average age of the abusers also differed for the two groups. For younger women, the average age of the abuser was comparable to their own age, 34.8 years. Most likely husbands and boyfriends were close to the age of their victims. For those in the older group, the average age was 49.2 years, $t(3,699)=33.52, p \leq .0001$, reflecting the combination of older spouses and younger relatives among the abusers.

³ We note that there were about 15 individuals in total for whom the abuser was listed as either a current or former wife or girlfriend. We assume this was a recording error as a same sex partner category is included in the InfoNet system (although none of the victims

Referral Source

Table 4 presents information on referral sources into service. Regardless of age group, the majority of women who came into services were referred by the police. This was the case for a significantly greater proportion of women 65 and older though (46% versus 37%), $X^2(1, N=4,922)=40.11, p \leq .0001$. Significant differences between the groups also existed related to the proportions that were referred by friends and by the State's Attorney's office, as well as the proportion that was self-referred or referred through a hotline. Despite their statistical significance, however, most of these differences were not large. Individuals 65 and older were significantly less likely to be referred by a friend (4% versus 9%), $X^2(1, N=4,922)=37.62, p \leq .0001$, or to be self referred (8% versus 13%), $X^2(1, N=4,922)=23.65, p \leq .0001$, and more likely to be referred by a the State's Attorney's office (8% versus 4%), $X^2(1, N=4,922)=28.55, p \leq .0001$. Although the proportion was very small, older women were also significantly less likely to be referred by a hotline (1% versus 3%), $X^2(1, N=4,922)=17.00, p \leq .0001$. Similar proportions of clients over and under 65 were referred by a social service program (between 10 and 11%). Only small proportions of clients in either group were referred to services by relatives or through a hospital or medical source. About 5% in each group were referred by legal sources. Lastly, those in the older age group were significantly less likely to be referred by an "other" source (8% versus 11%), $X^2(1, N=4,922)=19.23, p \leq .0001$, but this last category includes a number of sources from which only very small proportions of victims in both age groups were referred to services.

Service Utilization

Tables 5 and 6 contain information on services received by victims in both groups. Table 5 provides data on the proportion in each group who received a specific service

Table 3 Offender characteristics by age of the victim

ABUSER/OFFENDER CHARACTERISTICS (Total in Each Group)	Victim is 18 to 64	Victim is 65 or older
Relationship of abuser/offender to client	(2,393)	(2,594)
% Husband or ex-husband	47.0	27.0*
% Boyfriend or ex-boyfriend	40.6	5.5*
% Father or mother’s boyfriend	1.0	0.3
% Other male relative	3.4	40.0*
% Male friend	2.8	3.1
% Male acquaintance	0.4	1.5*
% Mother or father’s girl friend	0.7	0.2
% Other female relative	1.8	19.1*
% Female friend	0.6	1.0
% Female acquaintance	0.3	1.0
% Unknown	1.1	1.1
Gender of offender/abuser	(2,388)	(2,625)*
% Male	96.1	79.3
% Female	3.9	20.7
Age at time case opened	(2,079)	(2,271)
Average age	34.83 (sd=10.16)	49.24* (sd=17.52)

*For differences between groups, $p \leq .0001$

while Table 6 includes information on the hours of service provided to those who got specific services.

The data in Table 5 indicate that there was only one service in which the proportion of women in the older age group was significantly greater than the proportion of women in the younger age group who received the service; this was civil and/or criminal advocacy related to obtaining Orders of Protection (OP). Eighty-two percent of all women

65 and older who received services obtained this assistance compared to 76% of women 18 to 64, $X^2(1, N=5,235) = 28.98, p \leq .0001$. For all the remaining services listed in the table, with the exception of criminal legal help or advocacy around charges and other legal help, where the two groups were fairly equivalent, women 18 to 64 were more likely to obtain the service compared to those 65 and older. Many of these differences were statistically significant at the .0001

Table 4 Referral sources for victims by age of the victim

Referral source: (total number in each group)	Victim is 18 to 64 (2,364)	Victim is 65 and older (2,558)
% Referred by police	37.1	46.1*
% Referred by a hospital	3.9	3.7
% Referred by a social service program	11.5	10.2
% Referred by a relative	3.9	5.4
% Referred by a friend	8.5	4.2*
% Self referred	12.7	8.4*
% Referred by a medical source ^a	3.3	3.3
% Referred by state’s attorney’s office	4.1	7.7*
% Referred by a private attorney	1.7	2.3
% Referred by a legal system source	4.8	4.9
% Referred by the clerk of the circuit court	1.5	1.6
% Referred by hotline	2.9	1.3*
% Referred by an other source ^b	11.5	7.9*

*For differences between groups, $p \leq .0001$

^a Includes Medical Service Provider, Medical Advocacy Program and Public Health Program

^b Includes clergy, educational personnel, DCFS, media sources, telephone, other projects and “other” sources

Table 5 Service information for clients by age group: percent receiving services

% Receiving (total number in each group)	18 to 64 (2,495)	65 and Older (2,740)
On-site shelter	11.6	4.1*
Off site shelter	1.2	0.6
Civil legal/criminal legal advocacy//OP ^a	75.9	82.0*
Criminal legal advocacy/charges	13.6	15.9
Other legal help ^b	14.7	15.5
Other advocacy ^c	31.7	26.4*
Transportation	10.8	9.4
Employment assistance	3.2c	1.0*
Educational assistance	3.3	1.6*
Medical assistance	4.8	3.9
Economic assistance	3.7	1.7*
Concrete family services ^d	9.8	3.4*
Collaborative case management services	15.7	11.7*
Substance abuse services	2.5	0.4*
Individual counseling services ^e	71.3	57.5*
Adult group counseling services	16.5	7.8*
Family counseling services	3.4	0.7*
Group therapy services ^f	1.4	0.2*
Other services ^g	0.7	0.6

*For differences between groups, $p \leq .0001$

^aIncludes civil legal advocacy related to Order's of Protection and criminal legal advocacy related to obtaining Orders of Protection

^bIncludes individual legal advocacy, State Coalition provided legal services or attorneys, other legal services or attorneys and conflict resolution services

^cIncludes other individual and group coalition provided advocacy

^dIncludes child care services, life skills services and parental services

^eIncludes individual in person counseling and telephone counseling

^fIncludes Art Therapy and Group Therapy

^gIncludes Lock Up Services, and Evaluation and Assessment Services

level or less. Of particular note is that 71% of women in the younger age group obtained individual counseling services compared to 57% of women 65 and older, $X^2(1, N=5,235)=107.27, p \leq .0001$. Similarly, the proportion of women 18 to 64 who obtained adult group counseling services was double that of women 65 and older (17% versus 8%), $X^2(1, N=5,235)=93.21, p \leq .0001$. Older women were also significantly less likely to receive onsite shelter compared to women who were 18 to 64 (4% versus 12%), $X^2(1, N=5,235)=104.60, p \leq .0001$.

The data in Table 6 suggests that although women who were younger were significantly more likely to get many services, significant differences between the groups related to hours of service for specific services were only evident

for two services; criminal legal advocacy related to charges and individual counseling services. For the first service, average service hours for those 65 and older were significantly greater than the average hours for those 18 to 64 (3.79 h per person versus 2.31), $t(736)=4.10, p \leq .0001$. For individual counseling, women 18 to 64 received significantly more service hours on average (5.27 versus 3.55), $t(2,925)=-4.16, p \leq .0001$. While other differences in hours for specific services were not statistically significant at the .0001 level or less, the data in the table indicate that for most services, those 18 to 64 received more service hours, on average compared to women 65 and older.

Given the fact that more women 18 to 64 received many services and that their average hours were generally higher than older women who received the same services, it is not surprising that there were significant differences between the groups related to total hours of service, total service contacts and the average number of different services received. In all instances, those who were in the younger age group had higher averages than those 65 and older. Total hours for the younger age group across all services averaged 13.04 h and total service contacts averaged 15.68 per person. For those 65 and older, the average for total hours was 8.43, $t(3,608)=-5.77, p \leq .0001$, and for contacts it was 9.58, $t(3,851)=-5.47, p \leq .0001$. Women 18 to 64 received 3.38 different services per person on average while those 65 and older received slightly fewer at 2.73 per person, $t(4,479)=9.67, p \leq .0001$.

Further Analysis of Service Utilization Age was associated with a number of other variables, e.g., a greater likelihood of being White, having a disability, being unemployed, and receiving income from public sources, which might explain some of the difference in service receipt, apart from age alone. Therefore, we ran a regression analysis predicting total number of service hours including these variables and the onsite shelter variable in the model (see Table 7). Using the cutoff of .0001 or less as the measure of significance, the results indicate that being under 65, being any race or ethnicity other than African American and receiving onsite shelter were all associated with greater total hours of service. The model also indicates that onsite shelter status accounted for the greatest variance, even accounting for these other factors.

Discussion

Although there are many similarities in the circumstances of older and younger women victims who are using DV services, some of the differences that exist are large enough to warrant closer examination. Below we discuss these

Table 6 Service hours by age group

OF THOSE RECEIVING SERVICE, AVERAGE SERVICE HOURS PER PERSON FOR THOSE RECEIVING SERVICE	18 to 64			65 and Older		
	(n)	(M)	(sd)	(n)	(M)	(sd)
Civil legal/criminal legal advocacy//OP	1,894	3.86	10.17	2,246	3.66	4.65
Criminal legal advocacy/charges	339	2.31	3.80	437	3.79	6.22*
Other legal help	366	2.87	10.08	426	2.49	5.75
Other advocacy	864	2.39	6.07	813	1.90	5.01
Transportation	270	2.39	4.20	257	2.49	3.69
Employment assistance	79	2.92	6.71	27	1.65	2.95
Educational assistance	81	2.15	4.83	43	1.24	1.66
Medical assistance	120	2.13	4.56	107	2.86	6.33
Economic assistance	92	1.51	2.13	46	1.56	2.27
Concrete family services	245	7.77	15.06	92	3.51	5.60
Collaborative case management services	391	2.67	8.91	320	2.49	5.81
Substance abuse services	62	4.11	10.44	12	0.79	0.79
Individual counseling services	1,771	5.27	14.73	1,571	3.55	8.69*
Adult group counseling services	411	15.98	28.26	214	12.35	20.02
Family counseling services	85	5.19	6.58	20	1.85	2.36
Group therapy services	36	7.19	7.01	6	10.75	13.74
Other services	17	1.34	0.77	17	1.38	1.14
TOTALS						
Total hours of service per person on average across all services	2,495	13.04	35.91	2,740	8.43	18.12*
Total service contacts per person on average across all services	2,495	15.68	49.10	2,740	9.58	27.66*
Average number of different services received per person across all services	2,495	3.38	2.81	2,740	2.73	2.01 *

*For differences between groups, $p \leq .0001$

^a Includes civil legal advocacy related to Order's of Protection and criminal legal advocacy related to obtaining Orders of Protection

^b Includes individual legal advocacy, State Coalition provided legal services or attorneys, other legal services or attorneys and conflict resolution services

^c Includes other individual and group coalition provided advocacy

^d Includes child care services, life skills services and parental services

^e Includes individual in person counseling and telephone counseling

^f Includes Art Therapy and Group Therapy

^g Includes Lock Up Services, and Evaluation and Assessment Services

differences as well as similarities. However, before discussing implications of the findings and ways in which the service system can better meet the needs of both groups of women, it is important to note the limitations of the data.

Limitations First, while the data are useful because they include the whole population of persons utilizing state-funded DV programs over a longer time period, giving a picture of the characteristics of women coming into the service system (Grossman and Lundy 2003), some research suggests that persons who seek help may differ from other victims of violence, especially related to their experience of abuse. Studies suggest that those seeking assistance may experience more severe abuse (Gelles and Straus 1988, as

well as Henning and Klesges 2002, for a summary of this literature). Thus, individuals who have experienced less serious abuse may be missing from this population, although West et al. (1998) report no relationship between severity and the likelihood of seeking services (Henning and Klesges 2002). Additionally, although the data were from a population of individuals in the DV service system, they are only from one state. The extent to which Illinois is unique from other states is not clear. It includes both urban and rural areas, and is therefore more likely to be similar to states with a comparable regional character.

Second, related to this first point, because this is a population of service users, it is not possible to talk about differences in the violence experience of victims who do and do not use services

Table 7 Regression model predicting total service hours

Variable	Parameter estimate (standard error)	T-Value	Pr>T
Intercept	6.68069 (1.01372)	6.59	≤ .0001
Victim is African American versus any other race/ethnicity	-3.80274 (0.93263)	-4.08	≤ .0001
Victim is under 65	5.17009 (1.02453)	5.05	≤ .0001
Victim has a disability or special need ^a	1.08188 (1.28029)	0.85	0.3981
Victim receives income from employment	-2.61332 (1.00641)	-2.60	0.0094
Victim receives income from a public source ^b	2.49068 (1.05757)	2.36	0.0186
Victim received onsite shelter services	31.70224 (1.51195)	20.97	≤ .0001

Overall Adjusted RSquare .1,015 ($N=4,728$) $F=90.05$ (6,4721) $Pr>F. \leq .0001$

^a Includes problem in activities of daily living, visual problem, deafness or hearing impairment, need for wheelchair accessibility, developmental disability, immobility, special dietary needs, need for help to administer medication and “other” physical or mental disabilities

^b Includes Temporary Assistance to Needy Families, Aid to Families with Dependent Children, General Assistance, Social Security and Supplemental Security Income

with this data. We could examine differences in the experiences of women who use different types of services, particularly older and younger victims who use shelter services. However, this was not the focus of the present article. We are currently engaged in further analysis of the data which examine the shelter group more closely (Grossman and Lundy 2007a, b). Our preliminary analyses suggest as a whole, the shelter group differs from those who never obtain shelter in some important ways. Future analyses will consider age differences as well.

Third, because data were not collected specifically for research purposes, in-depth information was not available and response categories were quite broad in many instances. This made it difficult to obtain specific information about several areas including the exact relationships between relatives who were abusers and victims. Further, clear uniform criteria for determining the different types of abuse were not specified in the instructions for form completion. The persons conducting the intake assessment, from which our data were derived, had been trained to recognize various forms of abuse. However, we cannot report the behaviors constituting the various types of abuse identified in this analysis, and information on abuse was not substantiated; it was based solely on client self-report and/or worker assessment. With these limitations in mind, we turn to our discussion of the findings.

Findings The data indicate that older and younger women have somewhat different circumstances when they seek help for abuse. Some of these differences probably reflect differences related to age that are evident within the general population and are not reflective of differential experiences with violence. For example, older women were less likely to be working and more dependent upon public income sources for their support, particularly social security

benefits. They were also more likely to be widowed which is perhaps reflective of their age compared to younger women in the service system. Older women were also more likely to experience abuse by a relative, although about one third were abused by a current or former spouse or boyfriend. These differing circumstances, even when they reflect general differences associated with age, may affect the types of supports and services that each group needs. Additional services need to be identified and arranged that relate specifically to the older victims, e.g., legal service providers that are knowledgeable about social security and pensions, as well as ways to plug into adult protective services for various other needs, particularly when the abuse is related to caretaking burden. Further, domestic violence agencies need interventions that re-connect older victims with their families of origin and extended families, who may be worn out by years of conflict and violence, and/or who may not live nearby. More information is needed about the physical and mental health needs of older women, with a greater focus on social supports available and how to access them.

Second, compared to younger women, older women very clearly have special needs and/or disabilities. Even though the percent of older women with such needs was not high, overall, domestic violence shelters need to arrange for walkers or wheelchairs for those with distinct physical disabilities, and to have resources for medications and other special services that are relevant to an aging group that has experienced long term physical abuse; abuse that is likely to have exacerbated aging characteristics. It is possible that the lack of access to such supports prevents a greater number of older women from entering the service system.

Third, the data clearly indicate that older women, compared to younger women, are less likely to be receiving

some of the services which could be especially helpful to them. For example, older women were significantly less likely to be obtaining individual or group counseling services. Only 57% of women 65 and older received individual counseling services of some kind compared to 71% of women between 18 and 64; about 8% of older women received group counseling compared to 16% of those under 65. Yet, the literature suggests that such services can be especially helpful to victims of abuse (Henning and Klesges 2002; Howard et al. 2003). At the same time, older women were significantly more likely to obtain legal advocacy assistance around orders of protection, and slightly more likely to obtain other legal help and advocacy around DV charges. This is reassuring given the previous discussion about the potentially more complicated legal needs of older versus younger women. However, none of the differences relating to legal services between the groups were very large, even the one which was statistically significant. Further, older women received fewer hours of service and averaged fewer service contacts overall than younger women. These findings are especially disconcerting given the complex needs of older women.

One factor that may account for the difference is that older women were less likely to be in onsite shelter; only about 4% of women in this age group were in this setting at some point, compared to 12% of women 18 to 64. Additional analysis using the InfoNet data indicates, as noted above, that victims in onsite shelter received more services, overall, and had higher averages for total service hours and total service contacts compared to those who did not receive onsite shelter (Grossman and Lundy 2007a, b). Further, results of the regression analysis suggest that onsite shelter status accounts for the greatest variance in total service hours, although older women still received fewer total service hours when onsite shelter status was controlled. Nonetheless, it is possible that older women receive fewer services and have fewer service interactions because they are less likely to be in a shelter setting.

The question then becomes why older women who are victims of abuse are less likely to receive onsite shelter, especially considering that the data indicates that they are less educated and more dependent on public monies, both factors that would suggest a greater need for more services. Although this is more likely to be an issue for older women, disabilities may keep some women out of shelters, but only about 16% of all older women seeking services had a disability of some kind.

One possibility is that older women do not see their problem as domestic abuse and will not access domestic violence shelters. If they are connected to services, they may prefer to utilize resources other than a shelter. Indeed, referral data suggest that older women are less likely to self-refer into any program compared to younger women.

Piispa (2004) makes the important point that perhaps one rationale for why there are more younger victims of DV than older ones' has to do with the sociopolitical environment. That is, younger women may feel more confident in speaking out about being abused. Younger women are likely to have received messages about not tolerating abuse by a partner that were not available to older victims, either as younger women and perhaps also as older women. This difference may also be a product of the different paradigms that we use to think about domestic violence and elder abuse that were discussed in the beginning of this article. Consequently, older women may be less likely to label their situation as "abusive" and to seek help from a DV agency. This may also explain why they receive fewer services; they may be less likely to seek them out or accept them once they are connected to service providers. The sociopolitical climate of the victim's situation, therefore, is a factor that cannot be overlooked as we seek greater understanding of women's circumstances and behaviors across different age cohorts.

Services for victims that are provided by the adult protective and domestic violence service systems would be facilitated by more cooperation and inter-agency coordination and there is some evidence of changes taking place. For instance, a Florida community began collaboration between a DV agency and other community services, including the Florida Department of Elder Affairs, in order to respond to the large population of older adults who might be victims of abuse (Vinton 1992). The collaboration established 'safe places,' both in and outside of shelters, and developed collaborations among a variety of services involved in either elder care or DV. What is striking is that from this relatively small endeavor, a training curriculum on older adult DV and other materials, there was an increase in older adults who used the shelters, from 70 in 2000-2001, to 123 in 2001-2002 (Vinton 2003, p. 1511). Although clearly a useful coordination of efforts and interests, currently, this type of collaboration is not a usual resource.

Another consideration might be coordinated services between younger and older victims, especially considering the level of mutual support and information sharing that might occur across the age groups. Agencies might develop creative programs where older and younger victims work together, to learn new ways of being in relationships, and to embrace independence. Domestic violence agencies generally are skilled in providing peer support groups and advocacy. These services seem particularly instructive to women who might be learning new ways to interact in non-coercive relationships, to express personal preferences and/or experience compromise as a possible alternative without negative personal consequence.

In addition, while both adult protective services and domestic violence agencies have been struggling to provide

accurate and effective services for older victims of abuse, they have been doing so with little research support. It is incumbent upon researchers to continue to explore and describe the circumstances and needs of older victims of IPV, and to document the specific needs of victims across the age groups in order to better inform agencies about the services that are needed.

Perhaps most significant, additional data may be needed in order to truly have a base of information with which to evaluate the services needed for women across different age groups. For example, the InfoNet data includes information about perceived service needs, but some of the specific needs of older women often are not included, and while some needs are documented, it is not clear at this time how these data relate to services received.

What is most apparent when we examine interpersonal violence across the lives of these two age cohorts, is the

degree of human complexity that is further complicated by the service systems involved and by the assumptions regarding the issues that exist. It is as though we identify and grapple with one set of issues, e.g., the battering of young women, only to face that our older adults also are being battered. This knowledge forces us to the realization that each group requires specific individual and systemic responses to their needs, while at the same time economic and social realities propel us toward the need for coordinated service systems. According to the Population Resource Center (2008), the population over 85 may potentially reach an estimated 21 million by 2,050, indicating a greater need for services for older adults at the same time that services required by younger women likely will not abate. Research and services must consequently become more specific and more collaborative. Our work is only beginning.

Appendix

Table 8 Comparison of total population of females 18 to 64 and random sample

Variable	Original population of female clients 18 to 64	Individual is in sample group of female clients 18 to 64year olds
Total number of clients in selected group	243,724 (M. Age=32.8, S.D.=9.64)	2,500 (M. Age=32.8, S.D.=9.74)
Client demographics race (total number included in analysis)	(238,384)	(2,444)
% White	54.2	55.2
% African American	26.7	27.1
% Hispanic	15.6	14.7
% Asian American	1.6	1.5
% American Indian	0.3	0.2
% Bi-Racial	0.9	0.8
% Other race	0.8	0.6
Education (total number included in analysis)	(196,690)	(2,045)
% Less than high school graduate	24.3	24.1
% High school graduate or some college	64.1	64.7
% College graduate or higher	11.6	11.2
Income sources (total number included in analysis)	(225,742)	(2,311)
% Public income sources as primary or secondary source	15.0	14.4
% Employment as primary or secondary source	52.4	53.2
Marital status (total number included in analysis)	(232,959)	(2,397)
% Single	37.7	37.6
% Currently married	45.2	45.9
% Divorced or separated	15.6	15.3
% Widowed	1.0	0.9
% Common law	0.4	0.3
% With language challenge (total number included in analysis)	(243,724) 7.7	(2,500) 7.6
% With special needs requiring special attention (total number included in analysis)	(243,724) 5.3	(2,500) 5.8

References

- Aciermo, R., Gray, M., Best, C., Resnick, H., Kilpatrick, D., Saunders, B., et al. (2001). Rape and physical violence: comparison of assault characteristics in older and younger adults in the national women's study. *Journal of Traumatic Stress, 14*(4), 685–695. doi:10.1023/A:1013033920267.
- Administration on Aging (2007). *Older Americans Act*. Retrieved November 10, 2007. http://www.aoa.gov/about/legbudg/oa/oa_1965.pdf.
- Brandl, B., & Cook-Daniels, L. (2002). *Domestic abuse in later life: A research review*. Retrieved February 14, 2005. www.ncea.aoa.gov/NCEARoot/Main_Site/pdf/research/rschart.pdf.
- Brandl, B., & Raymond, J. (1997). Unrecognized elder abuse victims: older abused women. *Journal of Case Management, 6*(2), 62–68.
- Durose, M.R., Harlow, C.W., Langan, P.A., Motivans, M., Rantala, R. R., Smith, E.L., et al. (2005). Family violence statistics. United States Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. Retrieved January 25, 2005. <http://www.ojp.gov/bjs/pub/pdf/fvs02.pdf>.
- Gelles, R. J., & Straus, M. A. (1988). *Intimate violence: the causes and consequences of abuse in the American family*. New York: Simon & Schuster.
- Grossman, S. F., & Lundy, M. (2003). Domestic violence across race and ethnicity in women 55 years and older: The Illinois experience. *Violence Against Women, 9*, 1442–1452. doi:10.1177/1077801203259233.
- Grossman, S.F., & Lundy, M. (2007a). *Analysis of InfoNet data from domestic violence agencies, January 1998 through December 11, 2005*. Chicago, IL: Illinois Criminal Justice Information Authority. www.icjia.state.il.us/public/pdf/ResearchReports/Analysis_of_InfoNet_Data_from_Domestic_Violence_Agencies_ES.pdf.
- Grossman, S. F., & Lundy, M. (2007b). Characteristics of women who do and do not receive onsite shelter services from domestic violence programs. Manuscript submitted for review.
- Henning, K. R., & Klesges, L. M. (2002). Utilization of counseling and supportive services by female victims of domestic abuse. *Violence and Victims, 17*(5), 623–636. doi:10.1891/vivi.17.5.623.33714.
- Howard, A., Riger, S., Campbell, R., & Wasco, S. (2003). Counseling services for battered women. *Journal of Interpersonal Violence, 18*(7), 717–734.
- Illinois Department on Aging (2007). Elder abuse and neglect act and related laws. Retrieved October 24, 2007. http://www.state.il.us/aging/1news_pubs/publications/ea-act_book.pdf.
- Lundy, M., & Grossman, S. F. (2004). Elder abuse: spouse/intimate partner abuse and family violence among elders. *Journal of Elder Abuse and Neglect, 16*(1), 85–102.
- McFarlane, J., & Malecha, A. (2005). Sexual assault among intimates: Frequency, consequences, and treatment. U.S. Department of Justice. National Institutes of Justice. Retrieved January 26, 2007. www.ncjrs.gov/pdffiles1/nij/grants/211678.pdf.
- O'Donnell, C. J., Smith, A., & Madison, J. R. (2002). Using demographic risk factors to explain variations in the incidence of violence against women. *Journal of Interpersonal Violence, 17*(12), 1239–1262.
- Pillemer, K., & Finklehor, D. (1988). The prevalence of elder abuse: a random sample survey. *The Gerontologist, 28*, 51–57.
- Piispa, M. (2004). Age and meanings of violence: Women's experiences of partner violence in Finland. *Journal of Interpersonal Violence, 19*(1), 30–48.
- Podnieks, E. (1992). National survey on abuse of the elderly in Canada. *Journal of Elder Abuse and Neglect, 4*, 5–58.
- Population Resource Center (2008). The Aging of America. Retrieved February 16, 2007, http://www.prcdc.org/300million/The_Aging_of_America/.
- Rennison, C., & Rand, M. R. (2003). Nonlethal intimate partner violence against women. *Violence Against Women, 9*(12), 1417–1428.
- Speltz, K., & Raymond, J. (2000). Elder abuse, including domestic violence in later life. *Wisconsin Lawyer, 73*, 1–5.
- Straka, S. M., & Montminy, L. (2006). Responding to the needs of older women experiencing domestic violence. *Violence Against Women, 12*(3), 251–276.
- Teaster, P. B. (2000). Sexual abuse of older adults. *Journal of Elder Abuse & Neglect, 12*(3/4), 1–16.
- Tjaden, P., & Thoennes, N. (2000). *Extent, nature, and consequences of intimate partner violence: Findings from the National Violence Against Women survey*. Washington, DC: Department of Justice, Office of Justice Programs, National Institute of Justice. Available on line <http://www.ncjrs.org/pdffiles1/nij/181867.pdf>.
- Vinton, L. (1992). Battered women's shelters and older women: the Florida experience. *Journal of Family Violence, 7*(1), 63–72.
- Vinton, L. (2003). A model collaborative project toward making domestic violence centers elder ready. *Violence Against Women, 9*(12), 1504–1513.
- West, C. M., Kantor, G. K., & Jasinski, J. L. (1998). Sociodemographic predictors and cultural barriers to help-seeking behaviors by Latina and Anglo American battered women. *Victims and Violence, 13*(4), 361–375.
- Wilke, D. J., & Vinton, L. (2005). The nature and impact of domestic violence across age cohorts. *Affilia: The Journal of Women and Social Work, 20*(3), 316–328.
- Wisconsin Coalition Against Domestic Violence. (1996). *Domestic Abuse in Later Life: A Cross-Training Manual on Working with Older Abused/Battered Women*. Madison, WI: Author.

Copyright of *Journal of Family Violence* is the property of Springer Science & Business Media B.V. and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.