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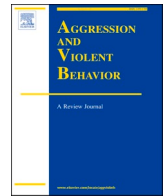
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# Perpetrators of domestic abuse against older adults – a rapid evidence assessment

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## ABSTRACT

This rapid review examines the existing, published research on the demographic and health characteristics, and the offending behaviours and histories of perpetrators of domestic violence and abuse against adults aged 60 and over. Using a systematic methodology, searches were conducted in five databases: MEDLINE Complete, APA PsychInfo, CINAHL Complete, SociINDEX with Full Text, Criminal Justice Abstracts with Full Text, and Web of Science (Core Collection), resulting in 75 papers being included in the review. Much of the available evidence comes from the elder abuse field, with few specific domestic abuse studies. The review found that non-intimate partners, that is (adult) children or other family members, are the most frequently reported perpetrator group. Most perpetrators tend to be male, and, where information is available, poor health, and drug and alcohol problems are often reported. We conclude that we need to build more evidence on perpetrators of domestic violence and abuse using a wider methodology, which should be situated within the conceptual lens of domestic abuse, and that policy and practice should urgently review whether existing risk assessment tools and perpetrator programmes are suitable given most domestic abuse of older adults is perpetrated by younger sons, daughters or other family members.

## 1. Introduction

Despite increased research on issues related to aging and older age, abuse of older adults (defined as 60 or over in this study) is a neglected area of academic study. Available data and research literature spans multiple disciplines (gerontology/elder abuse, violence against women and domestic abuse/intimate partner abuse), which have evolved separately and remain largely distinct (McCreadie, 1996; Whittaker, 1995; Penhale, 2003) making it difficult to extract and establish firm knowledge on victims and perpetrators. Most of the available evidence is currently found within the elder abuse field; although there is no agreed definition of elder abuse, most incorporate abuse by perpetrators outside of the family (such as carers, people in positions of trust and in some cases strangers) meaning evidence on spouse and family member perpetrators is subsumed within these studies (see author, 2020 for a critical review). Additionally, the broadness of elder abuse definitions – which typically include abuse by family members, close friends, colleagues, carers/paid workers and – in some cases, neighbours, acquaintances and strangers – create ‘difficulties in defining,

characterizing and explaining a phenomenon that has many possible configurations’ (Santos, Nunes, Kislaya, Gil and Ribeiro, 2019, p.2). Meanwhile, most studies on domestic abuse have paid limited attention to older age, and in many cases restrict the focus to intimate partner violence among young adults. As Straka and Montminy (2006, p.253) observed, domestic abuse research is typically ‘grounded in a gender perspective but does not account for age’, whereas the elder abuse literature is often ‘grounded in an aging perspective but does not account for gender’. Globally, at least one in six older people living in the community experience some form of abuse each year (Yon et al., 2017). Most studies have found that elder abuse is perpetrated by a spouse/partner or family members (with most of these indicating an almost equal split between the two perpetrator groups) (Jackson, 2016; Santos, Nunes, Kislaya, Gil and Ribeiro, 2019). Therefore, most ‘elder abuse’ would fall within definitions of domestic abuse or intimate partner violence (IPV). Indeed, studies which specifically look at domestic abuse have also reported that at least one in six older people experience abuse each year, with several studies reporting higher rates of prevalence. For example, in a systematic review of studies examining intimate partner

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violence against adults aged 60 and over, Warmling et al. (2017) found the prevalence of psychological violence ranged from 1.9 to 36.1 %, physical violence from 1.8 to 5.9 % and 1.2 % for sexual violence. Over the last decade, several studies have specifically examined domestic abuse among older adults. Most of this work has focused on victimisation, specifically estimating prevalence and assessing victim characteristics and demographics (Gerino et al., 2018; Meyer et al., 2020; Warmling et al., 2017). Several systematic reviews have examined existing knowledge about violence against older adults. Most of these have focused on the prevalence of different forms of violence within or across different countries (see Warmling et al., 2017). However, as Meyer et al. (2020) point out, while these reviews have captured a wide range of types of violence, they have failed to consider the type of perpetrators or patterns of co-occurring types of violence. In fact, little is known about perpetrators of abuse relating to older adults, with only a handful of studies examining perpetrator characteristics, health, employment and education background and motivations (see for e.g. De Donder et al., 2011; Tinker et al., 2008). Even in the elder abuse field, which dates back to the 1980s, there is a noticeable lack of empirical research on perpetrators (Ramsey-Klawnsnik, 2017).

DeLiema et al. (2018) argue that the disproportionate focus on victims compared with abusers is driven by two main factors: first, the elder abuse model originated from, and remains located within, a social work and child protection style framework with a focus on support and protection of victims rather than a criminal justice model which focuses on prosecuting abusers. Second, collecting information from perpetrators who often deny allegations or are unlikely to acknowledge or admit abuse in research surveys or interviews – is difficult. Consequently, there is very little knowledge about the characteristics of perpetrators of domestic abuse against older adults.

Some previous studies (which pre-date the period selected for this rapid evidence assessment) provide some insights into the profile of perpetrators of ‘elder abuse’, although many focused on one specific form of abuse (e.g. sexual) and overall, the data is still limited. For example, one of the first studies was conducted by Anetzberger (1989) who interviewed 15 adult children (typically sons) about their abuse against elderly parents, typically mothers. Alcohol abuse and mental illness featured heavily in the profiles of these perpetrators. Acierno et al.’s (2009) National Elder Mistreatment Study reports that perpetrators of emotional and physical abuse were usually known to their older adult victims and were family members in the majority of cases. Perpetrators of physical assault were more likely to be abusing substances at the time of assault than those of emotional abuse and were more likely to have histories of mental illness. Half of the perpetrators were unemployed and socially isolated. The National Elder Abuse Prevalence study in Australia (2021) found only 10 % of elder abuse perpetrators are intimate partners, with (adult) children (18 %) or partners of (adult) children (7 %) accounting for a quarter (Qu et al., 2021). Sons or daughters made up the largest group of perpetrators for physical, psychological, and financial abuse. Men were more likely to commit abuse (55 %) and were more likely to not be employed. Additionally, most perpetrators lived with the victim. However, this study examined all perpetrators of elder abuse including friends, neighbours, professional carers and other non-familial perpetrators.

In a review of criminal justice records relating to 87,422 elder abuse incidents more than two thirds (71.5 %) of suspects/offenders were male (Krienert et al., 2009). Several studies also report that the nature of abuse differs between male and female abusers, with males most likely to perpetrate physical and sexual forms and females more likely to perpetrate psychological and financial abuse, and neglect (see Roberto, 2017). Alcohol abuse, mental health and unemployment have been highlighted as features of perpetrators in previous elder abuse studies (Krienert et al., 2009).

Meanwhile, studies on IPV against older women (and thus limited to intimate partner perpetrators) have tended to focus on victim characteristics and experiences, and barriers to help-seeking (see Roberto et al.,

2013 for a review). In 2003, Mouton, 2003 commented that at that time studies of IPV in older adults had not yet identified the characteristics of violence perpetrators. Although this is still an emerging field, most research in this field has been published in the last decade, hence a review of contemporary literature is needed.

Although these studies provide some limited data on perpetrators, they are spread across multiple fields of study and many, particularly in the elder abuse field, include perpetrators that are non-familial. Additionally, there have not been any specific reviews on characteristics of perpetrators of domestic violence and abuse against older adults. To help fill this evidentiary gap, the current study aimed to examine and describe the demographic and health characteristics, and the offending behaviours and histories of perpetrators of domestic abuse against older adults using a rapid evidence assessment methodology spanning multiple fields of study. Specifically, the research questions addressed by the rapid evidence assessment were: (1) What are the profiles of perpetrators (characteristics, health and criminal justice backgrounds) of domestic abuse against adults aged 60 and over? (2) Are there any differences in the offending behaviours and/or perpetrator profiles of intimate partner perpetrators compared with other family member perpetrators? As almost all papers reporting on perpetrators also report on some victim demographics or factors, we also included this in our analysis where appropriate (for example, where perpetrator sex and victim sex may be relevant) although the focus of the review remained on perpetrators.

## 2. Materials and methods

For the review we adopted a broad definition of domestic abuse in line with the Domestic Abuse Act (2021) in England and Wales, which defines domestic abuse as behaviour of a person towards another where both people are personally connected (either in an intimate relationship currently or previously, or members of the same family) and the behaviour is abusive. Behaviour is “abusive” if it consists of any of the following—(a) physical or sexual abuse; (b) violent or threatening behaviour; (c) controlling or coercive behaviour; (d) economic abuse; (e) psychological, emotional or other abuse; and it does not matter whether the behaviour consists of a single incident or a course of conduct. This definition is wider than many international definitions of domestic abuse which are limited to those who are in, or have been in, intimate relationships (often referred to synonymously as intimate partner violence). Additionally, we also included neglect (but not self-neglect) as a form of domestic abuse in recognition that this form of abuse is observed frequently among older adults (Yon et al., 2017). Finally, we also included studies which focused on domestic homicides.

To address the research questions, a rapid evidence assessment was conducted spanning all relevant disciplines (including but not limited to domestic abuse/intimate partner abuse, violence against women, elder abuse, health, social policy, social work and adult safeguarding) applying a systematic search methodology. A rapid review methodology was utilised to allow for the conducting of an exhaustive and rigorous search and review of existing literature in a given timeframe. Rapid evidence assessments are conducted in a shorter timeframe than systematic reviews and often only search literature from the previous decade but are particularly useful for producing evidence quickly to inform research and/or policy, while still upholding rigorous methods (Varker et al., 2015).

### 2.1. Search strategy

Following piloting of an initial search strategy, a systematic search of electronic databases was conducted by one author in January 2022. The following five electronic databases were searched: MEDLINE Complete, APA PsychInfo, CINAHL Complete, SociINDEX with Full Text, Criminal Justice Abstracts with Full Text, and Web of Science (Core Collection). The search strategy involved key terms related to or describing the three

concepts of:

1. Domestic relationship: e.g. “domestic”; “intimate partner”; “partner”; “family”; “adolescent to parent”; “spouse”
2. Violence/abuse: e.g. “violence”; “abuse”; “homicide”
3. Age of victim: e.g. “older”; “old”; “elder”; “elderly”

Due to the lack of evidence in the field, the search strategy did not specify perpetrators as one of the core concepts in the search strategy and focused instead on the three concepts of a domestic relationship; violence/abuse; and age of the victim (60+ years). The full-text screening stage then involved examining whether information on perpetrators was available, and extracting this information from relevant studies where it was present.

## 2.2. Inclusion and exclusion criteria

The review included empirical peer-reviewed quantitative, qualitative or mixed method studies, published in English since 2010, and which reported on characteristics of perpetrators of any type of domestic violence and abuse towards adults aged 60 and older. Studies which were not empirical in nature, not peer-reviewed journal articles (e.g. conference papers, books, theses), not published in English, or did not report separately on the characteristics of perpetrators of domestic violence and abuse specifically towards adults aged 60+, were excluded from the review. The decision to exclude studies from before 2010 was driven by the fact that the dominant elder abuse field has seen an increase in the extent of work that has been published globally over the last decade (Sweileh, 2021), and the nature of the rapid evidence assessment method, which often focuses on recent literature across a period of about the last 10 years (Varker et al., 2015).

## 2.3. Study selection and data extraction

Citations retrieved from the searches of the five databases were transferred to Zotero reference software to remove duplicate citations. The de-duplicated citations were then uploaded into Rayyan systematic review software, which was used both for title and abstract screening and for full-text screening. Out of the 4616 citations screened at title and abstract stage, 440 were retained for full-text review. At both abstract and full-text screening stages, all records were screened by a primary screener against the inclusion and exclusion criteria and more than 20 % were screened independently by a second reviewer, with agreement on 92 %. Disagreements were solved by discussion or with reference to a third reviewer. Following screening at full-text, a total of 75 articles (73 separate studies) met the inclusion criteria and were included in the review (see Fig. 1).

An Excel spreadsheet was developed to standardise data extraction of all relevant information from the studies. The data extraction sheet included background and contextual information about the study, as well as information about the relationship between the victim and perpetrator, perpetrator criminal history, and the socio-demographic and health related characteristics of perpetrators and victims (sex/gender; ethnicity; age; health and mental health; alcohol/drug use). Three researchers extracted the data and coded the main findings from each of the 75 articles. The extracted data were then thematically analysed.

## 3. Results

### 3.1. Study characteristics

An overview of the characteristics of the 75 articles that met the inclusion criteria of the review is provided in Table 1. Although the systematic search resulted in a total of 75 articles (based on 73 different studies), the majority of these focused on victims or victimisation and

typically provided limited data on perpetrators. There was only one paper which focused specifically on perpetrators (De Donder et al., 2011), although this was based on a fuller community prevalence study which clearly had a key focus on victimisation.

Most of the studies included in the review were based in Europe (excluding UK) ( $n = 22$ , 29 %) and the USA ( $n = 17$ , 23 %) (Fig. 2). Only three studies were based in the UK, with one of these (Clarke et al., 2016) focusing specifically on Wales.

We grouped the literature into elder abuse or domestic abuse categories based on the title or terminology used in the paper. Papers which used IPV, domestic abuse or domestic violence terminology fell into the domestic abuse category, whereas papers which used elder abuse, elder mistreatment or abuse of older adults terminology fell into the elder abuse category. Papers which used neither of these fell into the homicide, violence or the ‘other’ category. Most of the articles were based within the field of elder abuse (56 %,  $n = 42$ ). Only 13 studies (17 %) specifically focused on domestic abuse of older adults and/or framed the study as domestic abuse (Fig. 3). Most of our knowledge about perpetrators therefore comes from research which is situated within a gerontological/elder abuse framework.

Twelve out of the 75 included articles utilised qualitative methods, two took a mixed methods approach, and the remaining 61 used quantitative methods. More than half ( $n = 41$ ) of the included articles reported only on the type of domestic relationship between the victim and the perpetrator and did not provide further information about perpetrator characteristics. Thus, most of the findings from the rapid review are restricted to this element. Out of the 34 studies which included more than one perpetrator characteristic, the majority (73.5 %,  $n = 25$ ) are quantitative in approach. Tables 2 and 3 only include the studies which included information on at least two elements of perpetrator characteristics. In cases where the type of abuse is not specified in the sample and methods section column of the table, the study used a broad definition of abuse encompassing various forms of abuse (e.g. physical, sexual, emotional, financial abuse).

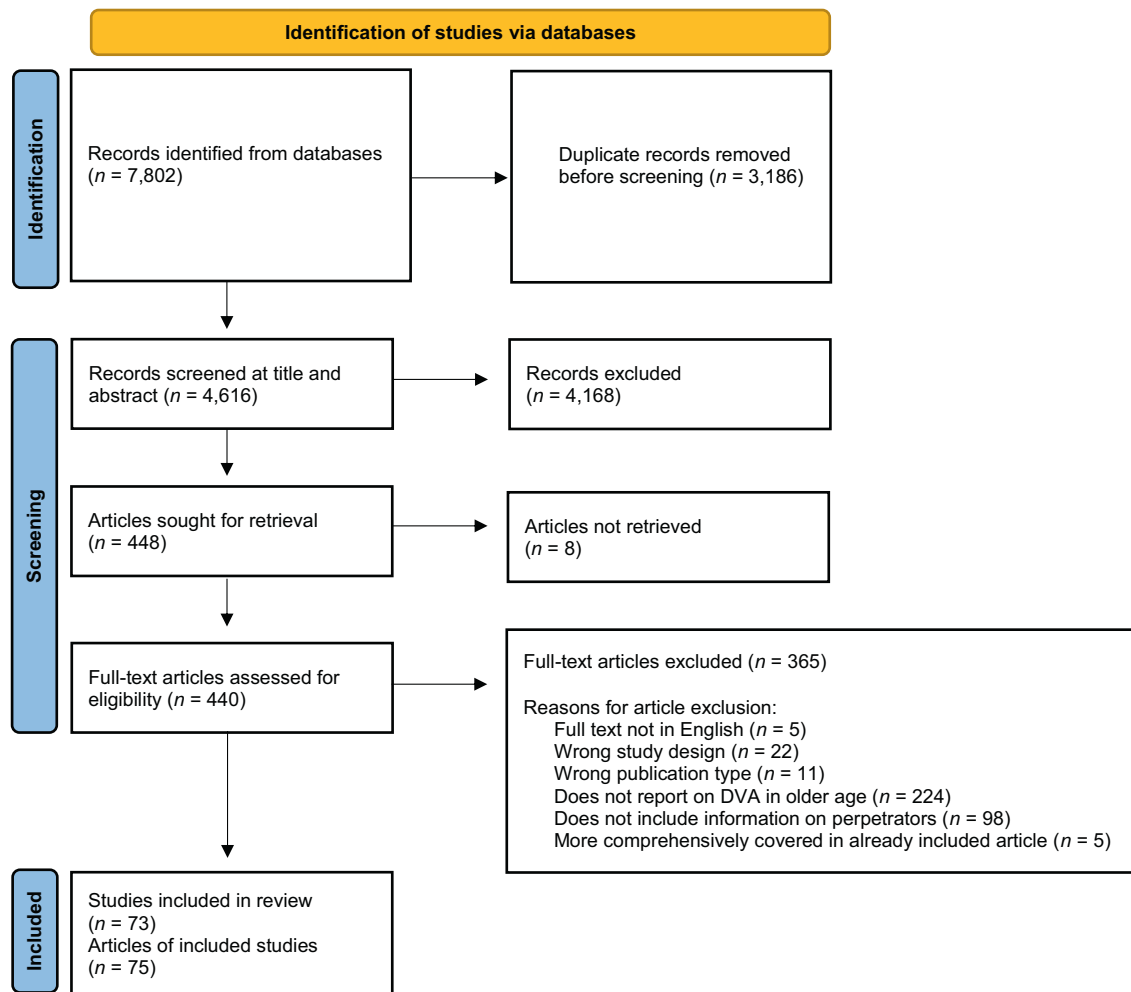
### 3.2. Perpetrator demographics

#### 3.2.1. Sex/gender

The sex or gender<sup>1</sup> of the perpetrator was available and reported in 32 studies (Tables 2 and 3). Eleven out of the 32 studies only provided partial data, for example Carmona-Torres et al. (2020) conducted a multi-country study on domestic abuse against older adults in Spain, Portugal and Bolivia, but only reported on the perpetrator sex data in relation to Spain. Similarly, De Donder et al. (2011) examined abuse and violence against older women in five European countries, examining abuse by intimate partners and other family members, but only report on perpetrator sex in the child-perpetrator data.

Overall, the quantitative studies (Table 2) report that perpetrators of violence and abuse against older adults tend to overwhelmingly be male. While two quantitative studies (Halicka et al., 2015; Stöckl et al., 2012) focused explicitly on male violence against women and therefore the proportion of male perpetrators was by definition 100 % in these studies, when these studies are excluded, the remaining 23 quantitative studies generally still report men as the majority of perpetrators, ranging from 43.2 % (Avanci et al., 2017) to 97 % (Salari & Sillito, 2016). This variation often reflected the nature of violence/abuse focused on in the study. Studies that considered homicide and/or homicide-suicide tended to report higher proportions of male perpetrators than female perpetrators (except Block, 2013), whereas studies with an elder abuse focus tended to report higher proportions of female victims – for example in Abdel Rahman and El Gaafary’s (2012) study focusing on elder abuse by partners or other family members in caregiver roles, 48 % of

<sup>1</sup> Across the studies, both gender and sex were adopted and were not typically defined by the researchers.



**Fig. 1.** Flow of studies through the review

Adapted from: Page MJ, McKenzie JE, Bossuyt PM, Boutron I, Hoffmann TC, Mulrow CD, et al. The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *BMJ* 2021;372:n71. doi:<https://doi.org/10.1136/bmj.n71> For more information, visit: <http://www.prisma-statement.org/>

perpetrators were female.

### 3.2.2. Relationship between victim and perpetrator

A total of six studies in the review focused only on intimate partners/ex-partners as perpetrators, three on only (adult) children as perpetrators, and an additional four only non-intimate domestic perpetrators which included both (adult) children and family members. Furthermore, six studies stated that the focus was on domestic relations but did not explicitly report on the nature of the relationship between the victims and the perpetrators. Out of the remaining 56 studies which did explicitly report on the relationship, the findings on the proportion of intimate and non-intimate domestic perpetrators varied greatly, from 7 % partner perpetrators (and 93 % other domestic perpetrators) in Dow et al.' (2020) study, to 81.8 % partner perpetrators (and 18.2 % other domestic perpetrators) in cases of rape and sexual assault in Bows and Westmarland's (2017) study.

It is likely that these differences across studies are to some degree the result of differing sampling and contextual factors of the studies, which make comparisons between the studies challenging. For example, seven studies in the review (Orfila et al., 2018; Leung et al., 2017; Lino et al., 2019; Shibusawa et al., 2014; Kim et al., 2018; Abdel Rahman & El Gaafary, 2012; Kumar & Patra, 2019) focused solely on domestic perpetrators in a caregiver role, rather than domestic abuse more widely. Although there are exceptions (e.g. Shibusawa et al., 2014), in these studies the proportion of perpetrators who were (adult) children tended

to be high, as was the proportion of female perpetrators (specifically daughters or daughters-in-law). This could therefore be a reflection of the demographics of those who are more likely to be undertaking the role of adult children caring for elderly parents. Differences between study findings could also reflect the living situation of the victim and their proximity to the perpetrator, including the role of extended families and (adult) children-in-law in victims' lives. In studies where this information is explicitly reported and where the need to live with the perpetrator was not a sampling criterion of the study, the majority of perpetrators tended to live with the victim (e.g. Dow et al., 2020; Drommi et al., 2021; Frazão et al., 2014; Halicka et al., 2015; Mackowicz, 2019). The partnership status of the victims also plays a role. For example, Frazão et al.' (2014) separate reporting of all victims of domestic abuse and only married victims of domestic abuse shows that the proportion of partner and child perpetrators varied greatly between the two. Among all victims, 28.6 % of domestic perpetrators were partners ( $n = 20$ ) and 47.1 % were (adult) children ( $n = 33$ ), but among married victims, 48.6 % were partners ( $n = 18$ ) and 32.4 % were (adult) children ( $n = 12$ ).

Studies which draw on nationally representative surveys or use nationwide administrative data to examine all types of domestic perpetrators may provide a more accurate reflection of the proportion of intimate and non-intimate domestic perpetrators. Only seven such studies are included in the review; four focus on domestic homicide and three on a broad definition of domestic abuse. In the four which focus on



**Table 1**  
Characteristics of included studies ( $n = 75$ ).

Author and year	Country	Framework	Approach	Methods/data and sample <sup>a</sup>
Abdel Rahman and El Gaafary (2012)	Egypt	Elder abuse	Quantitative	Cross-sectional survey with adults aged 60+ ( $n = 1106$ )
Adib et al. (2019)	Iran	Elder abuse	Qualitative	Qualitative interviews with victims of elder abuse aged 60+ ( $n = 18$ )
Avanci et al. (2017)	Brazil	Violence	Quantitative	Cross-sectional study of adults presenting to emergency services ( $n = 4893$ ), selected using probabilistic sampling
Aylaz et al. (2020)	Turkey	Elder abuse	Quantitative	Cross-sectional study of adults aged 60+ presenting to family health centres ( $n = 290$ ), selected using random sampling
Band-Winterstein (2012)	Israel	Domestic abuse	Qualitative	Qualitative interviews with 15 couples aged 62+, with individual interviews ( $n = 30$ ) of both partners, in cases where women experienced abuse by their male partner
Band-Winterstein and Avieli (2019)	Israel	Domestic abuse	Qualitative	Qualitative interviews with female victims of intimate partner abuse aged 63+ ( $n = 16$ )
Band-Winterstein et al. (2014)	Israel	Domestic abuse	Qualitative	Qualitative interviews with elderly adults who experienced abuse by their adult children with mental illnesses ( $n = 16$ )
Block (2013)	USA	Homicide	Quantitative	Police-recorded homicide data from the Chicago Homicide Dataset ( $n = 27,308$ )
Bows (2019)	UK	Homicide	Quantitative	Police-recorded domestic homicide data for victims aged 60+ collected using Freedom of Information requests ( $n = 221$ )
Bows and Westmarland (2017)	UK	Violence	Quantitative	Police-recorded rape and sexual assault data for victims aged 60+ collected using Freedom of Information

**Table 1 (continued)**

Author and year	Country	Framework	Approach	Methods/data and sample <sup>a</sup>
Bridges (2013)	USA	Homicide	Quantitative	requests ( $n = 655$ ) FBI Supplementary Homicide Reports relating to homicides and homicide-suicides ( $n = 400$ randomly selected homicides, $n = 184$ full sample of homicide-suicide cases) Randomly selected elder abuse cases from a protective service programme, involving adults aged 60+ ( $n = 250$ )
Burnes et al. (2016)	USA	Elder abuse	Quantitative	Cross-sectional study of adults aged 60+ recruited through health centres ( $n = 188$ in Spain, $n = 210$ in Bolivia, $n = 212$ in Portugal)
Carmona-Torres et al. (2020)	Multi-country: Spain, Portugal and Bolivia	Elder abuse	Quantitative	Qualitative interviews with concerned family members of older adults who had experienced familial financial exploitation ( $n = 28$ )
Chan and Stum (2022)	USA	Elder abuse	Qualitative	Cross-sectional survey of Korean adults aged 60+ ( $n = 240$ in Korea, $n = 240$ in LA)
Chang (2019)	Multi-country: USA and Korea	Elder abuse	Quantitative	Cross-sectional survey of adults aged 60+ ( $n = 400$ )
Chokkanathan (2018)	Singapore	Elder abuse	Quantitative	Cross-sectional survey with a random sample of adults aged 60+ ( $n = 897$ )
Chokkanathan and Natarajan (2018)	India	Elder abuse	Quantitative	Qualitative interviews with victims of familial abuse aged 65+ ( $n = 6$ )
Chokkanathan et al. (2014)	India	Elder abuse	Qualitative	Case management records from police, adult services, and other services on 131 elder abuse victims aged 65+ ( $n = 152$ ), plus interviews with practitioners ( $n = 20$ )
Clarke et al. (2016)	Wales	Elder abuse	Mixed methods	Autopsy reports of suspected
Coelho et al. (2010)	Portugal	Homicide	Quantitative	

(continued on next page)

Table 1 (continued)

Author and year	Country	Framework	Approach	Methods/data and sample <sup>a</sup>
Dayan (2022)	Hong Kong	Homicide	Quantitative	homicides of adults aged 65+ ( <i>n</i> = 78) Data on femicide collected from legal databases and the media ( <i>n</i> = 38)
De Donder et al. (2011)	Multi-country: Finland, Austria, Belgium, Lithuania, and Portugal	Domestic abuse	Quantitative	Cross-sectional survey with a random sample of women aged 60+ ( <i>n</i> = 2880)
DePrince et al. (2020)	USA	Elder abuse	Quantitative	Police incident reports on elder mistreatment involving adults aged 70+ ( <i>n</i> = 524) Qualitative interviews with domestic abuse victims aged 60+ receiving support from a support organisation ( <i>n</i> = 28)
Dow et al. (2020)	Australia	Elder abuse	Qualitative	Court cases involving mistreatment of adults aged 65+ ( <i>n</i> = 156) Cross-sectional survey of adults aged 60+ hospitalised at a Geriatrics Department ( <i>n</i> = 200)
Drommi et al. (2021)	Italy	Elder abuse	Quantitative	Clinical forensic medical reports of alleged domestic violence against adults with disabilities aged 65+ ( <i>n</i> = 70) Case-control study of physical elder abuse cases involving adults aged 60+ presenting at a trauma centre ( <i>n</i> = 41)
Filipska et al. (2020)	Poland	Elder abuse	Quantitative	Forensic medical centre assessments of elder abuse cases involving adults aged 60+ ( <i>n</i> = 68)
Frazão et al. (2014)	Portugal	Domestic abuse	Quantitative	Records relating to victims and perpetrators of violence aged 60+ referred to an interdisciplinary violence prevention team ( <i>n</i> = 198 victims,
Friedman et al. (2011)	USA	Violence	Quantitative	
Ghodousi et al. (2011)	Iran	Elder abuse	Quantitative	
Giezek et al. (2017)	Poland	Violence	Quantitative	

Table 1 (continued)

Author and year	Country	Framework	Approach	Methods/data and sample <sup>a</sup>
Gil et al. (2015) <sup>b</sup>	Portugal	Elder abuse	Quantitative	<i>n</i> = 114 perpetrators) Nationally representative cross-sectional survey of adults aged 60+ ( <i>n</i> = 1123) Cross-sectional survey of adults aged 65+, conducted in both community-based settings and nursing homes ( <i>n</i> = 300)
Habjanić and Lahe (2012)	Slovenia	Elder abuse	Quantitative	Court cases involving female victims of intimate partner violence aged 60+ ( <i>n</i> = 70) Cross-sectional study of adults aged 60+ referred to primary health care centres ( <i>n</i> = 400)
Halicka et al. (2015)	Poland	Domestic abuse	Quantitative	Forensic medical reports on elder abuse court cases involving adults aged 65+ ( <i>n</i> = 253) National Violent Death Reporting System data on homicides/
Hazrati et al. (2020)	Iran	Domestic abuse	Quantitative	homicides-suicides by a caregiver ( <i>n</i> = 68) Nationwide cross-sectional study of community-dwelling pairs of older adults with dementia and their family caregivers ( <i>n</i> = 467 pairs)
Karbeyaz & Çelikel, (2017)	Turkey	Elder abuse	Quantitative	National Incident-Based Reporting System data on homicides of adults aged 60+ ( <i>n</i> = 828)
Karch and Nunn (2011)	USA	Homicide	Quantitative	Cross-sectional study of adults aged 60+ visiting two family health centres ( <i>n</i> = 691) Cross-sectional study with a random sample of adults aged 60+ ( <i>n</i> = 125)
Kim et al. (2018)	Korea	Elder abuse	Quantitative	Cross-sectional study of adults aged 60+ who had applied for long-term care services ( <i>n</i> = 3435)
Krienert and Walsh (2010)	USA	Homicide	Quantitative	
Kulakçı Altıntaş, and Korkmaz Aslan (2020)	Turkey	Elder abuse	Quantitative	
Kumar and Patra (2019)	India	Elder abuse	Quantitative	
Leung et al. (2017)	Hong Kong	Elder abuse	Quantitative	

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Table 1 (continued)

Author and year	Country	Framework	Approach	Methods/data and sample <sup>a</sup>
Lino et al. (2019)	Brazil	Elder abuse	Quantitative	Cross-sectional survey of care recipient-family caregiver pairs ( $n = 135$ pairs)
Macassa et al. (2013)	Multi-country: Germany, Greece, Italy, Lithuania, Portugal, Spain, Sweden	Elder abuse	Quantitative	Cross-sectional nationally representative survey of adults aged 60+ ( $n = 4467$ )
Mackowicz (2019)	Poland	Elder abuse	Quantitative	Police records relating to victims of violence aged 60+ ( $n = 217$ ) Baseline data from a longitudinal survey of adults aged 65+ ( $n = 799$ )
Miszkurka et al. (2016)	Canada	Domestic abuse	Quantitative	Elder abuse court cases involving adults aged 65+ ( $n = 85$ )
Molinelli et al. (2017)	Italy	Elder abuse	Quantitative	Cross-sectional study of family caregivers of adults aged 65+ recruited from health care centres ( $n = 829$ )
Orfila et al. (2018)	Spain	Elder abuse	Quantitative	Cross-sectional survey and qualitative interviews with adults aged 60+ ( $n = 220$ )
Patel and Mishra (2018)	India	Elder abuse	Mixed methods	Cross-sectional crime victimisation survey of a random sample of adults aged 65+ ( $n = 635$ in Slovenia, $n = 1059$ in Sweden)
Pavšič Mrevlje and Nivala (2017)	Multi-country: Slovenia and Sweden	Violence	Quantitative	Cross-sectional survey of financial exploitation with a random sample of community-dwelling adults aged 60+ ( $n = 4156$ )
Peterson et al. (2014)	USA	Other	Quantitative	Cases referred to adult protective services for caregiver abuse ( $n = 294$ )
PolICASTRO et al. (2015)	USA	Other	Quantitative	Cross-sectional survey (ESA Services Study) of a probabilistic sample of adults aged 65+ waiting for medical services in primary health clinics ( $n = 1765$ )
Préville et al. (2014)	Canada	Domestic abuse	Quantitative	

Table 1 (continued)

Author and year	Country	Framework	Approach	Methods/data and sample <sup>a</sup>
Ribot et al. (2015)	Cuba	Elder abuse	Quantitative	Cross-sectional survey of adults aged 60+ enrolled in a family doctor-and-nurse office ( $n = 197$ )
Roncallo et al. (2021)	Italy	Homicide	Quantitative	Homicide-suicide cases from the legal medicine sector ( $n = 11$ cases, $n = 29$ total deaths)
Rosen et al. (2019)	USA	Elder abuse	Qualitative	Qualitative analysis of prosecuted elder abuse cases involving adults aged 60+ ( $n = 87$ )
Salari and Sillito (2016)	USA	Homicide-suicide	Quantitative	News surveillance data on intimate partner homicide-suicide cases ( $n = 728$ )
Sandmoe and Hauge (2014)	Norway	Domestic abuse	Qualitative	Qualitative interviews with domestic abuse victims aged 60+, abused by their children ( $n = 13$ interviews, $n = 14$ victims)
Santos et al. (2017) <sup>b</sup>	Portugal	Elder abuse	Quantitative	Cross-sectional nationally representative survey with respondents aged 60+ ( $n = 1123$ )
Santos, Gil and Ribeiro, 2019	Portugal	Domestic abuse	Qualitative	Qualitative interviews with victims of domestic abuse aged 60+ ( $n = 24$ )
Santos, Nunes, Kislaya, Gil and Ribeiro, 2019 <sup>b</sup>	Portugal	Elder abuse	Quantitative	Secondary analysis of victim data from two cross-sectional surveys: 1) Cross-sectional nationally representative survey with adults aged 60+ ( $n = 245$ ) 2) Convenience survey with victims of abuse ( $n = 510$ )
Sembiah et al. (2020)	India	Elder abuse	Quantitative	Cross-sectional survey with adults aged 60+ ( $n = 246$ )
Shawon et al. (2021)	USA	Homicide	Quantitative	National Violent Death Reporting System data on homicide victims aged 60+ ( $n = 6188$ )
Shibusawa et al. (2014)	Japan	Elder abuse	Quantitative	Cross-sectional study of respite care service using

(continued on next page)

Table 1 (continued)

Author and year	Country	Framework	Approach	Methods/data and sample <sup>a</sup>
Stanback and King-Kallimanis (2011)	USA	Homicide	Quantitative	adults aged 65+ (n = 118) Chicago Homicide data on homicide offenders aged 50+ (n = 972) Cross-sectional nationally representative survey with women aged 65+ (n = 776) Homicide data relating to adults aged 65+ (n = 537), compiled for a previous project from police records, personal interviews and newspapers Cross-sectional survey of a random sample of adults aged 65+ (n = 518) Data from pairs of dementia patients aged 65+ and their family caregivers, collected during hospital assessments (n = 133 pairs) Qualitative interviews with victims of elder abuse aged 60+ from Tamil and Punjabi communities (n = 11) and service providers (n = 10) Cross-sectional survey with purposive random sampling of adults aged 60+ (n = 100) Autopsy reports for deaths of adults aged 65+ (n = 784) Data on female victims of homicide collected from various sources (n = 145) Data from Wave 3 of a nationally representative survey of adults aged 60+ (n = 2334) Qualitative interviews with victims of domestic abuse aged 60+ who were referred to
Stöckl et al. (2012)	Germany	Domestic abuse	Quantitative	
Titterton and Reyes (2010)	USA	Homicide	Quantitative	
Tobiasz-Adamczyk et al. (2014)	Poland	Domestic abuse	Quantitative	
Toda et al. (2018)	Japan	Elder abuse	Quantitative	
Tyyska et al. (2012)	Canada	Elder abuse	Qualitative	
Vardhan (2017)	India	Elder abuse	Quantitative	
Ventura et al. (2020)	Italy	Elder abuse	Quantitative	
Weil and Keshet (2021)	Israel	Homicide	Quantitative	
Wong et al. (2019)	USA	Elder abuse	Quantitative	
Yan (2015)	China (Hong Kong)	Elder abuse	Qualitative	

Table 1 (continued)

Author and year	Country	Framework	Approach	Methods/data and sample <sup>a</sup>
Ziminski et al. (2013)	USA	Elder abuse	Quantitative	an elder abuse support service (n = 40) Secondary analysis of data on assessments of adults aged 65+ reporting physical elder abuse to Adult Protective Services (n = 67)

<sup>a</sup> The N values reported in this table reflect the total study sample size and do not necessarily refer exclusively to victims of domestic abuse aged 60+, as some study samples include other groups in addition.

<sup>b</sup> These articles all use or partially use data from the same Portuguese national prevalence study called 'Aging and Violence'.

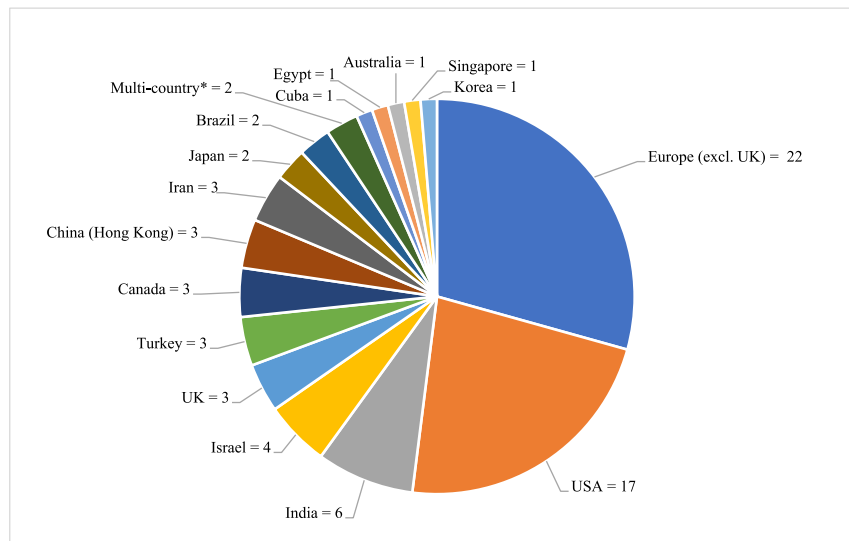
domestic homicide (Bows, 2019; Bridges, 2013; Krienert & Walsh, 2010; Shawon et al., 2021), the proportion of intimate partner/ex-partner and other family members was roughly equal, ranging from 41 % intimate partner and 59 % other family member (Bridges, 2013) to 48.2 % intimate partner and 51.8 % other family perpetrators (Krienert & Walsh, 2010). However, in domestic homicide-suicide cases, the proportion of intimate partner perpetrators was much higher at 81 %, with only 19 % of perpetrators being other family members (Bridges, 2013). The proportion of intimate and non-intimate domestic relations are also similar in the two nationally representative multi-country surveys (De Donder et al., 2011; Macassa et al., 2013), although Gil et al.' (2015) study based in Portugal had a lower proportion (22 %) of intimate partner perpetrators.

A factor worth noting here is that studies included in the review have focused on perpetrators of domestic abuse against victims aged 60 and older, but the studies rarely consider differences across these older age-groups. In the study by De Donder et al. (2011) which did consider this the results suggest differences in the type of perpetrators of violence/abuse against those aged 60 to 69 and those aged over 70, with a lower proportion of intimate partner/ex-partner perpetrators for those aged 70 and over when compared to those aged 60 to 69. Studies also rarely examined differences according to the severity and/or repetition of abuse, but the findings from the two studies which examined this suggested that a larger proportion of intimate partner perpetrators perpetrated the most serious or repetitive abuse (De Donder et al., 2011; Santos et al., 2017).

### 3.2.3. Relationship, perpetrator sex and type of abuse

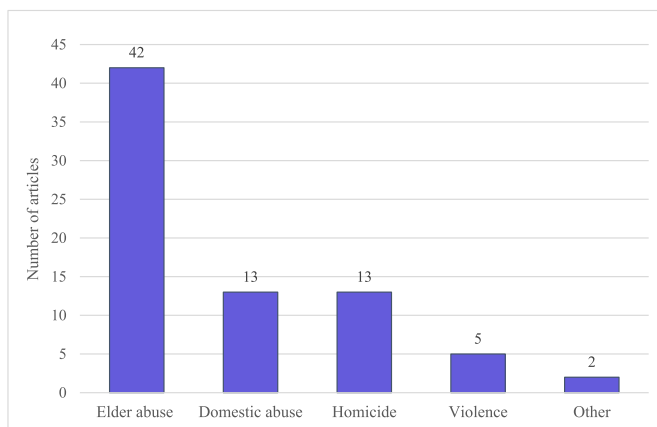
Other than studies which focused specifically on domestic homicide or homicide-suicide, and to a lesser extent domestic physical violence, it was rare for studies to focus on one type of violence/abuse, instead grouping together different types of abuse. Studies tended not to report separately on the different types of abuse included in their definition, report on victimisation/perpetration of a single type of abuse or to multiple types, or provide information about type of perpetrator relationship and type of abuse. This meant there was limited information on differences in type of abuse perpetrator according to relationship and perpetrator sex.

However, the limited available evidence about type of perpetrator relationship and type of abuse from six studies suggests that financial abuse might be more commonly perpetrated by offspring and other non-intimate family members, while physical abuse might be more commonly perpetrated by victims' partners or ex-partners, and potentially, the victims' male (adult) children. Studies which focused on financial exploitation only (Chan & Stum, 2022; Peterson et al., 2014) found (adult) children to be the most common perpetrators, with



**Fig. 2.** Geographical distribution of study settings

\*Note: These are multi-country studies that include at least one non-European country, while multi-country studies involving only European countries are categorised under the 'Europe (excl. UK)' heading.



**Fig. 3.** Study conceptual framework.

partners being the least common. Additionally, [Gil et al.' \(2015\)](#) nationally representative survey found that out of the 35 cases of financial domestic abuse, 2.8 % were perpetrated by a partner while 48.6 % were perpetrated by offspring and 48.6 % by other family members. Conversely, out of the 27 victims who suffered physical domestic abuse, perpetrators were partners in 63 % of cases, descendants in 26 % and other family members in the remaining 11 %.

Studies by [Clarke et al. \(2016\)](#) and [De Donder et al. \(2011\)](#) also report that partners and ex-partners were the most common perpetrators in cases of physical violence. Additionally, in [Habjanic and Lahe's \(2012\)](#) study, (adult) children (including children-in-law) were the perpetrators in 71.6 % of financial abuse, compared with 34.7 % being partners, while spouses were the perpetrators in 51.6 % of physical violence, with (adult) children being perpetrators in 40.3 % and (adult) children-in-law in 9.7 % of perpetrated physical violence. Out of the physical violence perpetrated by (adult) children or children in law ( $n = 31$ ), 77.4 % were perpetrated by the victim's son, 19.4 % by the daughter-in-law and only 3.2 % by the daughter.

### 3.2.4. Perpetrator age

Information about the perpetrator's age was available in 11 of the quantitative studies reviewed in the rapid review, although the quality

of information collected/provided varied and the age of perpetrators was also often directly linked to the focus of the study. For example, studies that focused on IPV unsurprisingly reported that perpetrator age was generally older, ranging from 52 to 82 ([Halicka et al., 2015](#)) whereas studies that included other family members as perpetrators reported a bigger range. For example, the analysis of domestic homicides involving older victims between 2010 and 2015 undertaken by [Bows \(2019\)](#) reported a perpetrator age range of 16–99, whilst [Frazão et al.'s \(2014\)](#) examination of alleged domestic violence against older victims with disabilities reported a perpetrator age range of 20–88 years.

### 3.2.5. Health, drug and/or alcohol abuse

Perpetrator alcohol and/or drug misuse was a common characteristic reported in the literature reviewed in the rapid review, regardless of the subject matter (e.g. elder abuse or domestic abuse). In some studies alcohol and/or drug misuse were discussed specifically as playing a role in violence perpetration (i.e. the perpetrator being under the influence at the time of perpetrating the violence), while in others it was reported as a characteristic of the perpetrators more widely. For example, in the quantitative studies, [Drommi et al. \(2021\)](#) who examined court cases concerning the exploitation of older people in Italy reported that 63 % of perpetrators were affected by alcoholism, substance abuse or psychiatric disorders. Similarly, [Frazão et al. \(2014\)](#) who were concerned with domestic abuse against older victims with disabilities reported that 75 % of perpetrators had issues relating to substance abuse ( $n = 24$ ), with 72 % specifically alcohol ( $n = 13$ ). Further, [Halicka et al.'s \(2015\)](#) study of IPV using court file data reported that all perpetrators had alcohol abuse problems and that 95.8 % were stated in reports to be under the influence of alcohol at time of the abuse. High rates of alcohol use were also reported in [Stöckl et al.'s \(2012\)](#) large, cross-sectional representative survey of victims, where almost 70 % of perpetrators were reported by victims as being heavy drinkers. In the qualitative studies, [Sandmoe and Hauge \(2014\)](#) found that 8 out of 17 perpetrators had problems with alcohol and/or drug addiction while [Rosen et al. \(2019\)](#) reported that out of 87 successfully prosecuted cases, 18 % of perpetrators were acutely intoxicated with alcohol or illicit substances at the time of the violent (physical) incident.

The perpetrator's physical and/or mental health conditions were also commonly reported in the literature. [Halicka et al. \(2015\)](#) found that out of 70 intimate partner perpetrators, 38.6 % suffered from serious somatic diseases, 14.3 % were disabled, and 5.7 % had dementia,

**Table 2**  
Included quantitative studies reporting on more than just victim-perpetrator relationship.

Author and year	Sample, sample relevant for review (if full sample not DA of older adults)	Type of violence and abuse	Perpetrator relationship to victim	Perpetrator sex/gender	Other perpetrator characteristics or relevant information
Abdel Rahman and El Gaafary (2012)	1106 adults surveyed, 43.7 % victims of domestic abuse ( $n = 483$ )	Physical, psychological, financial, neglect in last 12 months	57 % daughter or son ( $n = 273$ ); 33 % spouse ( $n = 161$ ); 10 % daughter-in-law ( $n = 49$ )	52 % male ( $n = 251$ ); 48 % female ( $n = 232$ )	<ul style="list-style-type: none"> <li>Age: 7 % less than 30 years old (<math>n = 35</math>); 22 % 30–39 years old (<math>n = 105</math>); 17 % 40–49 years old (<math>n = 84</math>); 54 % 50+ years old (<math>n = 259</math>)</li> <li>Mental illness: 3 % had psychiatric illness (<math>n = 14</math>)</li> <li>Perpetrator sex differences by victim sex: For male victims: 32.5 % male; 33.1 % female; 34.3 % both. For female victims: 50.8 % male; 44.7 % female; 4.4 % both.</li> </ul>
Avanci et al. (2017)	4893 adults surveyed, 2.8 % older victims of domestic abuse ( $n = 36$ )	Physical, negligence/ abandonment, other	Children as main perpetrators (exact data not provided)	43.2 % male; 39.9 % female; 16.9 % both	
Block (2013)	$n = 282$ homicides with domestic perpetrators	Homicide	49 % partner ( $n = 138$ ); 31 % child ( $n = 88$ ); 6 % stepchild ( $n = 16$ ); 7 % grandchild ( $n = 21$ ); 7 % child-in-law ( $n = 19$ )	Data only for partners ( $n = 138$ ): 56 % female ( $n = 77$ ); 44 % male ( $n = 61$ )	<ul style="list-style-type: none"> <li>Mental illness: 18 % of child/grandchild perpetrators of homicide had a mental illness (<math>n = 23</math>)</li> </ul>
Bows (2019)	$n = 221$ victims of domestic homicide	Homicide	46 % spouse ( $n = 102$ ); 44 % child or grandchild ( $n = 97$ ); 10 % other relative ( $n = 22$ )	For IPH: 78 % male ( $n = 80$ ); 22 % female ( $n = 22$ ) For parricide: 82 % male ( $n = 80$ ); 18 % female ( $n = 17$ )	<ul style="list-style-type: none"> <li>Age: For IPH (<math>n = 102</math>), perpetrators aged between 20 and 99, with majority aged between 60 and 69 (35 %, <math>n = 36</math>); followed by 70–79 (25 %, <math>n = 26</math>) and then 80–89 (22 %, <math>n = 22</math>). For parricide (<math>n = 97</math>), perpetrators aged between under 16–89, with majority aged between 40 and 49 (34 %, <math>n = 33</math>); followed by 30–39 (25 %, <math>n = 24</math>) and 50–59 (21 %, <math>n = 20</math>).</li> </ul>
Carmona-Torres et al. (2020)	610 adults surveyed, $n = 135$ victims of domestic abuse	Physical, psychological, sexual, financial, neglect in last 12 months	Spain ( $n = 13$ ): 75 % child; 8.4 % spouse; 16.6 % ex-spouse Bolivia ( $n = 75$ ): 73 % child; 9 % spouse; 19 % ex-spouse Portugal ( $n = 47$ ): 48 % child; 29 % spouse; 13 % in-laws; 11 % nephews 34.6 % spouse ( $n = 49$ ); 35.5 % son ( $n = 50$ ); 14.8 % daughter ( $n = 21$ ); 14.2 % grandson ( $n = 20$ ); 0.7 % granddaughter ( $n = 1$ )	57.1 % female (data only available for Spain)	<ul style="list-style-type: none"> <li>Age: average 53.9 years (data only available for Spain)</li> </ul>
Clarke et al. (2016) <sup>d</sup>	$n = 131$ victims of domestic abuse	Physical, psychological/emotional, sexual, financial, neglect	Two perpetrators in very small number of cases  Daughters and daughters-in-law had co-perpetrator in all but one case	71 % male ( $n = 109$ ); 29 % female ( $n = 44$ )	<ul style="list-style-type: none"> <li>Substance use/abuse: reactive abuse by children often linked to alcohol/drug dependence, particularly among sons<sup>a</sup></li> <li>Types of abuse: sons more likely to perpetrate emotional or financial abuse against mothers and emotional abuse against fathers. With IPV, physical abuse likely to be present.</li> </ul>
De Donder et al. (2011)	2880 adults surveyed, 28.1 % were victims of abuse	Physical, emotional, sexual, financial, neglect, violation of personal rights in last 12 months	All types of abuse: 41.4 % current partner; 27.7 % child (incl. in-law); 0.8 % parent; 3.5 % grandchild; 13.4 % other relative (out of all perpetrators)	Only available for child perpetrators: 22.2 % daughter (inc. in-law); 18.1 % son (inc. in-law)	<ul style="list-style-type: none"> <li>Perpetrator relationship differences by victim age: Victims aged 60–69 four times more likely to be abused by their partners than victims aged 80+. Abuse by children (inc. in-laws) lower among those aged 60–69 than those aged 70–79 and 80–89.</li> <li>Types of abuse: Neglect more common by daughters than sons, and financial abuse more common by sons than daughters.</li> <li>Severity of abuse: Relatively equal level of abuse by partner (23.6 %) and child (21.5 %) in lowest level of abuse severity, while in highest level of abuse severity, partner makes up 59.6 % of perpetrators and child 34.2 %.</li> </ul>
Drommi et al. (2021)	156 court cases, $n = 18$ related to domestic violence	Physical and mental abuse	84 % child, living with the victim	18/21 male	<ul style="list-style-type: none"> <li>Age: 15/21 aged over 40 years.</li> <li>Mental illness and substance use/abuse: 63 % of perpetrators affected by</li> </ul>

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Table 2 (continued)

Author and year	Sample, sample relevant for review (if full sample not DA of older adults)	Type of violence and abuse	Perpetrator relationship to victim	Perpetrator sex/gender	Other perpetrator characteristics or relevant information
Filipska et al. (2020)	200 adults screened, 39 % were victims of domestic abuse ( $n = 77$ )	Physical, psychological, sexual, financial in last 12 months	More than one perpetrator in very small number of cases <sup>a</sup> For any abuse: 51.9 % partner ( $n = 40$ ); 5.2 % sibling ( $n = 4$ ); 42.9 % child ( $n = 33$ );	Only available for child perpetrators: 91 % male ( $n = 30$ ); 9 % female ( $n = 3$ )	alcoholism, substance abuse or psychiatric disorders.  • Types of abuse: Partners most common for physical, sexual and financial abuse; sons and partners similar for verbal abuse. • Age: 20–88 (mean 52.5 years). • Mental illness: 72.7 % had psychiatric disorders ( $n = 8$ ) <sup>c</sup> . • Substance use/abuse: 75 % had issues of substance abuse ( $n = 24$ ), with 72 % specifically alcohol ( $n = 13$ ) <sup>c</sup> . • Cohabitation: 89.7 % living with victims ( $n = 52$ ).
Frazão et al. (2014)	$n = 70$ domestic abuse victims with disabilities	Physical, psychological, sexual, financial	28.6 % partner ( $n = 20$ ); 47.1 % child ( $n = 33$ ); 14.3 % child-in-law ( $n = 10$ ); 7.1 % grandchild ( $n = 5$ ); 2.9 % other relative ( $n = 2$ )	62.9 % male ( $n = 44$ )	• Age: 20–88 (mean 52.5 years). • Mental illness: 72.7 % had psychiatric disorders ( $n = 8$ ) <sup>c</sup> . • Substance use/abuse: 75 % had issues of substance abuse ( $n = 24$ ), with 72 % specifically alcohol ( $n = 13$ ) <sup>c</sup> . • Cohabitation: 89.7 % living with victims ( $n = 52$ ).
Ghodousi et al. (2011)	68 victims of abuse, $n = 65$ with domestic perpetrator	Physical, emotional, sexual, neglect	35.4 % spouse/partner ( $n = 23$ ); 50.8 % child ( $n = 33$ ); 13.8 % other relative ( $n = 9$ )	80.8 % male ( $n = 55$ ) <sup>b</sup>  In cases of child perpetrator ( $n = 33$ ): 90.1 % male; 9 % female	• Age: mean 39.6 years <sup>b</sup> . • Mental illness: 10.3 % had mental illness ( $n = 7$ ) <sup>b</sup> . • Substance use/abuse: 17.6 % were users of drugs ( $n = 12$ ) <sup>b</sup> .
Gil et al. (2015)	1123 survey respondents, $n = 86$ victims	Physical, psychological, sexual, financial, neglect in last 12 months	Across all abuse ( $n = 86$ ) 22 % (ex)spouse-partner ( $n = 19$ ); 22 % child/stepchild ( $n = 19$ ); 2.3 % grandchild ( $n = 2$ ); 4.7 % child-in-law ( $n = 4$ ); 48.8 % other relative ( $n = 42$ )	In cases of abuse by child or grandchild with single perpetrator ( $n = 21$ ): 71.4 % male ( $n = 15$ ); 28.6 % female ( $n = 6$ )	• Multiple perpetrators: Several perpetrators in some cases (combination unclear).
Habjanić and Lahe (2012)	300 survey respondents, more than half victims of abuse	Physical mental, financial in last 6 months	Percentage range across mental, physical and domestic abuse: 21.5–51.6 % spouse 35.4–43.8 % child 9.7–25.7 % child-in-law 6–11 % grandchild 3.5–11.3 % other family	Available only in cases of abuse by child (inc. in laws) Mental ( $n = 88$ ): 50 % male; 50 % female Physical ( $n = 31$ ): 77.4 % male; 22.6 % female Financial ( $n = 87$ ): 67.8 % male; 32.2 % female	• Type of abuse: Spouse most common perpetrator in cases of physical abuse (51.6 %) while child most common perpetrator in mental abuse (35.4 %) and financial abuse (43.8%).  • Age: 52–82 years. • Health: 38.6 % suffered from serious somatic diseases, 14.3 % were disabled, 5.7 % had dementia. • Previous IPV: majority had previously committed IPV, and about a third had a related prior conviction. • Substance use/abuse: all had alcohol abuse problems; 95.8 % under the influence of alcohol at time of abuse. • Cohabitation: 84.3 % living with victim. • Previous DV: 35 cases in which victim had already applied to judicial authorities once due to domestic violence by same perpetrator (repeat perpetrator spouse in 51.4 % cases ( $n = 18$ ) and son in 48.6 % of cases ( $n = 17$ )).
Halicka et al. (2015)	$n = 70$ victims of intimate partner violence	Physical, psychological, sexual, financial, neglect, overbearing control, chasing out of home	Male husband in all cases	Male perpetrators in all cases ( $n = 70$ )	• Age: 52–82 years. • Health: 38.6 % suffered from serious somatic diseases, 14.3 % were disabled, 5.7 % had dementia. • Previous IPV: majority had previously committed IPV, and about a third had a related prior conviction. • Substance use/abuse: all had alcohol abuse problems; 95.8 % under the influence of alcohol at time of abuse. • Cohabitation: 84.3 % living with victim. • Previous DV: 35 cases in which victim had already applied to judicial authorities once due to domestic violence by same perpetrator (repeat perpetrator spouse in 51.4 % cases ( $n = 18$ ) and son in 48.6 % of cases ( $n = 17$ )).
Karbeyaz and Çelikel (2017)	253 total cases, $n = 233$ domestic abuse victims	Physical	7.7 % spouse ( $n = 18$ ); 51.1 % child ( $n = 119$ ); 17.2 % child-in-law ( $n = 40$ ); 24 % other relative ( $n = 56$ ); 44.8 % husband ( $n = 13$ ); 37.9 % son ( $n = 11$ ); 10.3 % daughter ( $n = 3$ ); 3.4 % stepson ( $n = 1$ ); 3.4 % daughter-in-law ( $n = 1$ )	Male in majority of cases <sup>a</sup>  In cases of abuse by child (inc. in-laws): 91.8 % male ( $n = 146$ ); 8.2 % female ( $n = 8$ )	• Age: 52–82 years. • Health: 38.6 % suffered from serious somatic diseases, 14.3 % were disabled, 5.7 % had dementia. • Previous IPV: majority had previously committed IPV, and about a third had a related prior conviction. • Substance use/abuse: all had alcohol abuse problems; 95.8 % under the influence of alcohol at time of abuse. • Cohabitation: 84.3 % living with victim. • Previous DV: 35 cases in which victim had already applied to judicial authorities once due to domestic violence by same perpetrator (repeat perpetrator spouse in 51.4 % cases ( $n = 18$ ) and son in 48.6 % of cases ( $n = 17$ )).
Karch and Nunn (2011)	68 total homicides by caregiver, $n = 29$ were domestic victims aged 80+	Homicide (by intentional neglect or by physical injury to victim) and homicide/suicide by a caregiver	37.9 % son ( $n = 11$ ); 10.3 % daughter ( $n = 3$ ); 3.4 % stepson ( $n = 1$ ); 3.4 % daughter-in-law ( $n = 1$ )	86.2 % male ( $n = 25$ ); 13.8 % female ( $n = 4$ )	No additional information
Kumar and Patra (2019)	125 total adults surveyed, $n = 12$ victims of domestic abuse	Physical, verbal, sexual, financial, failure of designated caregiver to meet needs	6 cases son; 2 cases daughter-in-law; 3 cases both son and daughter-in-law	6 cases male; 2 cases female; 3 cases both male and female	No additional information
Lino et al. (2019)	135 pairs of caregiver-care recipient respondents, abuse present	Physical, psychological and neglect	All domestic caregivers (due to study focus)	6.5 % male ( $n = 3$ ); 93.5 % female ( $n = 43$ )	• Age: mean of 55 years. • Substance use/abuse: 26.1 % had problems with alcohol ( $n = 12$ ). • Cohabitation: 73.9 % cohabited with victim ( $n = 34$ ).

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Table 2 (continued)

Author and year	Sample, sample relevant for review (if full sample not DA of older adults)	Type of violence and abuse	Perpetrator relationship to victim	Perpetrator sex/gender	Other perpetrator characteristics or relevant information
	in 34 % of cases ( $n = 46$ )				
Mackowicz (2019)	$n = 217$ victims of domestic abuse	Physical, psychological, sexual, financial	47.9 % son; About 10 % daughter; 27.6 % partner  70.9 % cohabited with victim	84.7 % male	<ul style="list-style-type: none"> <li>Age: 17 % aged 40 or less; 27.6 % aged 41 to 55 years; 21.6 % aged 56 to 70 years; 12.4 % aged 70 + .</li> <li>Previous DV: reported in 48.6 % of cases.</li> <li>Substance use/abuse: Perpetrator under the influence of alcohol in a quarter of cases.</li> </ul>
PolICASTRO et al. (2015)	$n = 294$ cases of domestic abuse	Physical, financial, neglect	All abuse: 33.8 % Partner/spouse; 61.2 % child	Available only in cases of abuse by child: 41.9 % male; 58.1 % female	No additional information
Salari and Sillito (2016)	715 intimate partner homicide-suicide cases, $n = 215$ with victims aged 60+	Homicide/homicide-suicide	All intimate partners (due to study focus) – most were current partners	97 % male ( $n = 208$ )	<ul style="list-style-type: none"> <li>Previous DV: Known history of IPV in 14 % of cases.</li> <li>Motivation: Primary motivation suicide in 52 % of cases (<math>n = 111</math>).</li> </ul>
Sembiah et al. (2020)	246 survey respondents, 25.6 % victims	Physical, psychological, financial, neglect in last 12 months	55 % son ( $n = 33$ ); 6.7 % daughter ( $n = 4$ ); 38.3 % daughter-in-law ( $n = 23$ )	55 % male ( $n = 33$ ); 45 % female ( $n = 27$ )	No additional information
Stöckl et al. (2012)	4260 female survey respondents, $n = 40$ victims of physical or sexual IPV	Physical, sexual	All current intimate partners (due to focus of study)	All male partners	<ul style="list-style-type: none"> <li>Substance use/abuse: heavy drinking by only perpetrator reported by 41 % victims.</li> </ul>
Ventura et al. (2020)	784 cases, $n = 4$ with domestic perpetrator	Physical, psychological, financial, neglect	Out of 4 domestic perpetrators, all were children  9.4 % spouse ( $n = 6$ ); 26.6 % son ( $n = 17$ ); 26.6 % daughter ( $n = 17$ ); 28.1 % other relative ( $n = 18$ )	3 sons and 1 daughter	<ul style="list-style-type: none"> <li>Mental illness: 2/4 perpetrators had psychosis.</li> <li>Substance use/abuse: 1/4 suffered from alcoholism.</li> </ul>
Ziminski et al. (2013)	$n = 67$ victims of domestic abuse	Physical		50 % men ( $n = 31$ ); 50 % women ( $n = 31$ )	<ul style="list-style-type: none"> <li>Severity of abuse: 9/10 cases with head and neck bruises involved male perpetrators.</li> </ul>

Note: In some cases studies only provided percentages without accompanying base sample size numbers. In those cases only percentages have been reported in the table columns.

<sup>a</sup> : Exact data not provided in article.

<sup>b</sup> : 3 out of the 68 cases in Ghodousi et al. (2011) involved non-domestic perpetrators for which data could not be separated from the 65 domestic cases.

<sup>c</sup> : Data not available for all cases, percentages out of cases with available data

<sup>d</sup> : The wider study of Clarke et al. (2016) employs a mixed methods approach, but the data relevant to the review are quantitative, hence why it has been included here.

while Frazão et al. (2014) found that 72.7 % had psychiatric disorders ( $n = 8$ ). In Block's (2013) analysis of homicides of older adults by (adult) children or grandchildren, 18 % of perpetrators had a mental illness ( $n = 23$ ). In a qualitative study exploring elder abuse through interviews with 15 older couples, Band-Winterstein (2012) reported that the perpetrator had poor health in 8 of the 15 cases. Two studies (Band-Winterstein et al., 2014; Band-Winterstein & Avieli, 2019) have also specifically focused on abuse where the perpetrator has dementia or a mental illness.

We also found that caregiving can act as both a risk factor for abuse for older adults and a context in which abuse of older adults occurs. There is risk of abuse from family caregivers, with older adults who require care likely to be at a heightened risk of abuse, particularly in situations where the family caregiver experiences stress or burden or lacks support. For example, Orfila et al.'s (2018) study with 829 family caregivers found that prevalence of risk of abuse is high and are associated with caregiver/perpetrator anxiety and burden. Similar findings were reported by Lino et al. (2019) who also found the increased risk of abuse by caregivers was associated with alcohol problems. Other studies also report that being dependent on/need care provides a contextual risk factor for abuse however as victim-related risk factors for abuse was not a focus of a review we have not explored this further. Other reviews of risk factors for victimisation have examined this in detail (for example Gerino et al., 2018; Meyer et al., 2020).

### 3.2.6. Criminal history/previous violence

Few studies ( $n = 6$ ) included in the rapid review provided any data on perpetrator history of previous offending (see Tables 2 and 3). Halicka et al. (2015) examined IPV against older female victims and reported that most perpetrators had previously committed IPV and around a third had a related prior conviction. In an analysis of 254 court cases where a forensic medical report had been required, Karbeyaz and Çelikel (2017) reported that 14 % involved a victim who had already applied to the judicial authorities once due to domestic violence by the same perpetrator. In Mackowicz's (2019) analysis of 217 police records of violence/abuse involving a victim aged 60 or older, previous abuse was reported in 48.6 % of cases. In Rosen et al.' (2019) analysis of 87 successfully prosecuted elder abuse cases, a history of domestic violence was present in 57 % of cases. The findings also varied depending on methodology. For example, the analysis by Salari and Sillito (2016) of homicides and homicide-suicides reported in media articles found a smaller proportion of known/previous IPV in 15 % of the total 215 cases. However, sources based on media reporting are likely to have less information on perpetrators than official criminal justice records, which will also likely still underestimate the extent of previous perpetration of domestic abuse.

Qualitative studies often focus on victim narratives and experiences, and do not necessarily include data on the characteristics of perpetrators. It is also common for qualitative studies to select their sample



**Table 3**  
Included qualitative studies reporting on more than just victim-perpetrator relationship.

Author and year	N for relevant sub-sample	Type of violence and abuse	Perpetrator relationship to victim	Perpetrator sex/gender	Other perpetrator characteristics or information
Band-Winterstein (2012)	Qualitative interviews (n = 30)	Physical, emotional, limitation of freedom, atmosphere of power and control	All spouses (purposive sampling)	All male	<ul style="list-style-type: none"> <li>Age: 66–82 years.</li> <li>Health: poor health in 8/15 cases.</li> <li>Previous IPV: all had history of longstanding IPV with victims with whom they took part in the study.</li> </ul>
Band-Winterstein and Avieli (2019)	Qualitative interviews (n = 16)	IPV in all forms (physical, emotional, sexual etc)	All spouses (purposive sampling)	All male	<ul style="list-style-type: none"> <li>Age: 71–88 years.</li> <li>Health: all had dementia (due to focus of study) and dementia onset linked to violence or change in its form.</li> <li>Mental illness: 14/15 schizophrenia, 1/15 chronic depression.</li> <li>Substance use/abuse: 4/15 suffered from drug abuse.</li> <li>Cohabitation: co-resided with victims for 13–56 years.</li> </ul>
Band-Winterstein et al. (2014)	Qualitative interviews (n = 15)	Physical, psychological, financial, neglect	All adult children (purposive sampling)	Both male (sons) and female (daughters) but exact data not provided	<ul style="list-style-type: none"> <li>Types of family context profiles: <ul style="list-style-type: none"> <li>Single victim – single perpetrator (n = 7);</li> <li>Single victim – multiple perpetrators (n = 12);</li> <li>Two victims – single perpetrator (n = 1);</li> <li>Two victims – multiple perpetrators (n = 3)</li> </ul> </li> </ul>
Chan and Stum (2022)	Qualitative interviews (n = 28)	Financial	<p>Across all context profiles:</p> <ul style="list-style-type: none"> <li>- 8 cases of child only</li> <li>- 2 cases of re-married wife</li> <li>- 5 cases of child and in-law</li> <li>- 4 cases of child, in-law and grandchild</li> <li>- 1 case of in-law and grandchild</li> </ul> <p>7 % spouse (n = 2); 89 % child (n = 25); 4 % sibling (n = 1)</p>	<p>Across all context profiles:</p> <p>46 % male; 54 % female</p>	
Dow et al. (2020) D	Qualitative interviews (n = 28)	Defined broadly (exact definition not provided)	<p>More than one family member perpetrator in some cases</p> <p>Husband in 5/6 cases</p> <p>Brother in 1/6 cases</p>	66.7 % male (n = 18); 33.3 % female (n = 9)	<ul style="list-style-type: none"> <li>Cohabitation: 64 % co-resided with victim at the time (n = 18).</li> </ul>
Roncallo et al. (2021)	Domestic homicide-suicide cases (n = 6)	Homicide/homicide-suicide		Male in all 6 cases	<ul style="list-style-type: none"> <li>Age: 70–89 years.</li> </ul>
Rosen et al. (2019)	Elder physical abuse cases (n = 87)	Physical	<p>41 % son;</p> <p>18 % spouse/companion;</p> <p>16 % grandchild (no further detail)</p>	No available information	<ul style="list-style-type: none"> <li>Age: 16–65 years overall, and 35–57 for intimate partner perpetrators, with median age difference of 13 years between victim and perpetrator.</li> <li>Previous IPV: history of DV present in 57 % cases.</li> <li>Substance use/abuse: 18 % of perpetrators acutely intoxicated with alcohol or illicit substances.</li> <li>Mental illness: chronic mental health problems among 4/17 perpetrators.</li> <li>Substance use/abuse: problems with alcohol and/or drug addiction among 8/17 perpetrators.</li> </ul>
Sandmoe and Hauge (2014)	Qualitative interviews (n = 13)	Physical, psychological, sexual, financial, neglect	<p>All adult children (purposive sampling)</p> <p>3 cases of abuse by two children</p> <p>14 cases of offspring;</p> <p>8 cases of spouse/partner</p>	No available information	<ul style="list-style-type: none"> <li>Age: Grandchild aged 22 years; children aged 31–49 years, with 9/13 between 40 and 49 years.</li> <li>Types of abuse: All cases involved psychological abuse; sexual abuse (3 cases) involved husbands.</li> </ul>
Santos, Gil and Ribeiro, 2019	Qualitative interviews (n = 22)	Physical, psychological, sexual, financial	3 cases of two perpetrators	80 % male (n = 20); 20 % female (n = 5)	

purposively to focus very clearly on specific perpetrators or contexts (e. g. female victims of IPV by perpetrators with dementia, victims of abuse by (adult) children with mental illness). Nevertheless, qualitative studies do provide contextual and background information that needs to be considered when researching violence against older adults and what might differ with this age group.

Domestic abuse in older age can be abuse which has been ongoing and which continues into old age/older life. This group has been referred to as: ‘...the elderly graduates of domestic violence...’ (Homer & Gil-leard, 1990, p.1361). Older age can make it more challenging for victims to cope with the abuse and extrapolate themselves from the abusive relationship, both in cases where partners or adult children are the perpetrators (Band-Winterstein, 2012; Band-Winterstein et al., 2014; Santos, Gil and Ribeiro, 2019). There may be differences in the type of

domestic abuse experienced by victims who were abused prior to entering old age and those for whom abuse commenced in old age. Santos and colleagues (2019a) found that about half of the older interviewees in their study experienced ‘abuse grown old’ (domestic abuse which existed prior to the victim entering old age and then continued into old age) while half experienced ‘abuse after entering later life’ (domestic abuse which began after the victim retired or after they ‘perceived themselves to have entered old age’). Differences tended to be that ‘abuse grown old’ involved severe physical violence as well as psychological and financial abuse, and all cases of spousal sexual abuse were in this category, whilst ‘abuse after entering later life’ involved sporadic and/or no physical abuse and frequent psychological and financial abuse.

An issue which may be specific to perpetrators of domestic abuse

against older victims and not as common in perpetrators of domestic abuse against younger victims, is the potential role of illness in perpetrators. Qualitative interviews with female victims of domestic violence by male spouses/partners demonstrated how the onset of dementia can result in the commencement of violence perpetration in partners who had never previously been violent, while violence of a different form resulted with those perpetrators who had an existing history of violence (Band-Winterstein & Avieli, 2019).

### 3.2.7. Number of perpetrators

The majority of the studies in the review appeared to make the assumption of one victim, one perpetrator. However, eight studies in the review did not make this assumption and demonstrated that particularly in cases of domestic abuse perpetrated against older adults by non-intimate domestic relations, more complexity regarding the number of victims and/or perpetrators is present.

First, small-scale qualitative studies demonstrated that more than one victim can be victimised by the same perpetrator(s). For example, studies by both Sandmoe and Hauge (2014) and Santos and colleagues (2019a) included cases where adult couples were interviewed together as they were both suffering from abuse from their child. Chan and Stum's (2022) study of financial exploitation by domestic perpetrators also included cases with either two victims and a single perpetrator ( $n = 1$ ), or two victims and multiple perpetrators ( $n = 3$ ). In these cases the perpetrators were (adult) children, grandchildren or children-in-law.

Additionally, studies also reported on one victim being victimised by multiple perpetrators. In the aforementioned study by Chan and Stum (2022), they found that a prominent family context profile in financial exploitation involved one victim with multiple perpetrators, where the perpetrators were various combinations of (adult) children, children-in-law and grandchildren. Sandmoe and Hauge's (2014) study also found that in 3 out of 14 cases, the victim was abused by two of their (adult) children rather than just one, and 3 out of 18 participants in Santos et al.'s (2019a) study were also abused by multiple perpetrators. Additionally, in Kumar and Patra's (2019) study, 3 out of 11 cases involve two domestic perpetrators, with all such cases involving the victims' sons acting together with the victims' daughters-in-law, while Clarke et al.' (2016) also reported that where the perpetrators were daughters or daughters-in-law, there was a co-perpetrator in all cases except one. Although Santos, Gil and Ribeiro, 2019 included a case where the perpetrators were a stepdaughter and a husband, in the majority of cases with multiple perpetrators, the perpetrators were solely non-intimate domestic relations.

## 4. Discussion and conclusion

Domestic violence and abuse research has produced important evidence on the prevalence, nature and impacts of victimisation over the last four decades which have provided a critical evidence base for increasing knowledge and awareness of domestic abuse and support for victims. However, most of this research has focused on younger victims and there continues to be relatively little evidence relating to domestic abuse of older adults. Furthermore, there is a dearth of research on perpetrators of domestic abuse against victims of all ages, which has resulted in limited empirical and theoretical understanding of who perpetrates domestic abuse and why. As the need to develop evidence-based initiatives and interventions to prevent domestic abuse is becoming increasingly obvious, there is an urgent need to address these gaps in research.

We conducted a rapid review using a systematic methodology to examine and describe the demographic and health characteristics, and the offending histories of perpetrators of domestic abuse against adults aged 60 and over, as part of a broader study examining domestic abuse in later life. We found that only one study (De Donder et al., 2011) specifically focused on perpetrators of domestic abuse against older adults by drawing on data from a victimisation survey, and that no

studies collected data directly from perpetrators. This chimes with previous reviews, which have noted that the evidence on perpetrators is typically embedded in studies which ask older adults about their experiences of abuse (Roberto, 2017). Thus, as with other age groups and the literature more generally, most existing research focuses on victims, and data on perpetrators is typically collected via victims, either through victimisation surveys, analysis of legal or medical datasets, or via qualitative research with victims. Even in cases where perpetrator data is collected via victims, this is often limited only to the relationship between victim and perpetrator, with other perpetrator characteristics not collected, or at least not reported in the studies.

Most of the studies included in the review were based on research in Europe (excluding the UK) and the USA. Most were located within the 'elder abuse' field, meaning the research is situated within a gerontological framework. Less than one in five of the studies we reviewed took a specific domestic abuse perspective. This is important conceptually and methodologically. The varying definitions and relationship-contexts captured in elder abuse studies means extracting data specifically on domestic abuse (abuse perpetrated by a partner or family member) is difficult and the findings from these studies which group all abuse in varying contexts together under a single umbrella of elder abuse may mask important differences. Additionally, elder abuse research is primarily located within a gerontological framework which sees elder abuse as a socio-medical problem associated with age and inherent vulnerability (Harbison, 2016). Age is thus the master status (Leroux & Petrunik, 1990) in these studies, and intersectional analyses of violence and abuse are rare. The available evidence indicates that most perpetrators are male, with most studies reviewed providing at least some data on perpetrator gender/sex. Higher proportions of women perpetrators were observed in studies that were located within an 'elder abuse' framework, whereas those that used domestic abuse or broader 'violence' conceptual lenses tended to report higher proportions of male perpetrators, particularly in homicide studies, which is consistent with international data and literature on domestic abuse and domestic homicide (United Nations, 2019; World Health Organisation, 2012). However, some studies focused specifically on men's violence against women, and these were necessarily limited to this sex profile. This underscores the lack of research into same-sex domestic abuse and domestic abuse perpetrated by women – a problem across studies of all age groups (Stiles-Shields & Carroll, 2015), but particularly acute in our review.

With regard to the relationship between victim and perpetrator, there was a mix of studies reporting either partners or other family members were the primary perpetrator group, but this sometimes reflected the design and methodology of the study. For example, six studies focused specifically on IPV and three on domestic abuse perpetrated by (adult) children, so the findings are limited to that context and perpetrator relationship. There were 56 broader articles which included all types of domestic perpetrators and which reported on breakdowns of the nature of the relationship between victim and perpetrator, and among these there was some variation in the reported relationships between victims and perpetrators, with several studies reporting that daughters, sons or other family members were the majority of perpetrators (e.g. Abdel Rahman & El Gaafary, 2012; Block, 2013; Bows, 2019; Carmona-Torres et al., 2020; Clarke et al., 2016; De Donder et al., 2011; Drommi et al., 2021). The study context and focus is likely to explain some of this variation, and makes comparing study results difficult. Out of the seven studies which drew on nationally representative survey data or nation-wide administrative data (e.g. De Donder et al., 2011; Krienert & Walsh, 2010; Macassa et al., 2013; Shawon et al., 2021), these tended to show a relatively even distribution of perpetrators who were intimate partners/ex-partners and who were non-intimate domestic relations (adult children, children-in-law, grandchildren, other family). Gil et al. (2015) was an exception, as was Bows' and Westmarland's (2017) study, although the latter focused specifically on rape and sexual assault.

The age of perpetrators was also often reflective of, and dependent on, the scope of the study and relationship of perpetrator. Unsurprisingly, partner/spouse perpetrators tended to be a similar age to victims (Bows, 2019; De Donder et al., 2011; Halicka et al., 2015) whereas studies either focusing on abuse by son/daughter/other family members and/or where the majority of perpetrators were son/daughter/other family members, they generally reported a younger age range and/or mean (e.g. Abdel Rahman & El Gaafary, 2012; Frazão et al., 2014).

Problems relating to perpetrator intoxication and alcohol/drug misuse were commonly reported in the literature, regardless of the relationship between perpetrator and victim, and the context of abuse. Poor physical health and mental health problems were also reported, with the former often being discussed among partner perpetrators, and the latter identified more so among child perpetrators. It is therefore important that the design of policies and support provision take these factors into account.

The studies included in the review contained limited data on previous domestic abuse histories or criminal records, and with some conflicting findings. Due to the fact that the studies were victim focused and drawing on administrative data from medical records, police and courts, the available data was restricted to criminal records and not on previous histories of domestic abuse more widely. The data are therefore more likely to be a reflection of levels of victim disclosure to, and engagement with, official agencies and should not be taken to reflect whether or not the perpetrator had previously perpetrated domestic abuse.

Finally, we found that domestic abuse of older adults specifically by non-intimate domestic relations can involve either multiple victims abused by the same perpetrator, or one victim abused by multiple perpetrators. This was acknowledged by eight studies, with only five (Chan & Stum, 2022; Clarke et al., 2016; Kumar & Patra, 2019; Sandmoe & Hauge, 2014; Santos, Gil and Ribeiro, 2019) examining this in detail. Research which considers multiple perpetrators and multiple victims as well as bidirectional abuse is needed to develop understandings of domestic abuse in older age groups, but the baseline assumption should not be that there is always one victim, one perpetrator.

#### 4.1. Strengths and limitations

Although this rapid review employed a systematic approach to identifying, reviewing and analysing the evidence, it was not a systematic review. Due to the limited timeframe in which rapid reviews are conducted, our review was limited to literature that had been peer-reviewed and published in English, thus may have missed studies which had not undergone peer review, and which were published in another language. Additionally, the variation in conceptual and definitional frameworks – elder abuse, IPV, domestic abuse, familial abuse – makes comparisons between and across studies difficult. Furthermore, as abuse of older adults is so often subsumed in broader studies focusing on a wider range of issues, we may not have included some literature which did not make it clear in the abstract that older adults were included and/or that the study looked at abuse which could be considered ‘domestic’ in nature (e.g. perpetrated by a partner or other family member). Additionally, we were not able to carry out a quality assessment of the studies included in this review due to time constraints. However, to our knowledge this is the first review of characteristics of domestic abuse perpetrators who abuse older adults which provides insight into what we currently know about the profile of perpetrators, and which identifies where significant gaps remain. We hope it will prompt further research in this area and future reviews which can draw out a wider range of findings.

#### 4.2. Implications for practice, policy and research

Several implications arise from this review. First, in relation to research, there is a need to increase the evidence base on perpetrators of domestic abuse against older adults. Whilst we have made progress in

building empirical evidence on victims and victimisation, our knowledge on perpetrators lags significantly behind. Additionally, where data on perpetrators is available, this mostly comes from studies which surveyed or interviewed victims. These provide important insights, particularly around the nature of the relationship between victims and perpetrators, and could be expanded to include more questions on perpetrator backgrounds and demographics. Researchers should also consider expanding the data sources used to include official sources of data on perpetrators, such as police records, court records, safeguarding records, or data from domestic violence and abuse perpetrator programmes. Such sources could help expand our understanding of perpetrator motivations and the dynamics of domestic abuse against older adults. However, it is important to note that domestic abuse is often not reported to statutory agencies, so research on perpetrators should use a range of methods to build our understanding of domestic abuse that does, and does not, come to the attention of authorities.

Furthermore, there is a notable lack of research that examines abuse against older adults in non-heterosexual relationships. Similarly, few studies have looked at serial perpetrators, to assess the extent to which perpetrators of abuse against older adults are also, or have also, abused partners or family members previously. There is also limited data on repeated abuse against the same victim(s), since most studies look at incidents within a particular time frame. Studies which address these gaps are needed.

One of the interesting findings of this review is that most studies, irrespective of whether they use elder abuse definitions incorporating familial and non-familial samples, or domestic violence/abuse frameworks, find that adult children account for around half of perpetrators. We would go further than this though and call for the terms and concepts of domestic abuse to be used instead of elder abuse wherever the perpetrator is a partner or family member. This is consistent with most domestic abuse definitions.

This has implications for research, policy and practice. In terms of research, studies which focus on domestic abuse by partners and other family members are needed. Currently the evidence is spread across elder abuse, IPV and domestic abuse studies. Not only do some of these exclude adult-children as perpetrators meaning this abuse is not captured, the studies which include non-familial perpetrators (i.e. some elder abuse studies) lack the specificity and focus needed to fully understand the backgrounds, characteristics and risk factors for victimisation and perpetration of abuse. On that note, many current domestic abuse risk assessments are designed to capture risk from an intimate partner only, excluding up to half of the victimisation of older adults which comes from adult children. Risk assessment tools as well as broader domestic abuse policy and practice should be reviewed to ensure they are inclusive of older adults and the contexts in which they may experience domestic abuse. Furthermore, both policy and practice need to incorporate a wider range of perpetrators into intervention/prevention programmes - for example perpetrator programmes - and a key focus should be on identifying family perpetrators who have problems with mental health and/or alcohol/drug abuse at earlier stages.

#### CRediT authorship contribution statement

**Hannah Bows:** Writing – review & editing, Writing – original draft, Project administration, Methodology, Investigation, Funding acquisition, Formal analysis, Data curation, Conceptualization. **Merili Pullerits:** Writing – original draft, Methodology, Formal analysis. **Natalie Quinn-Walker:** Formal analysis.

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We have no conflicts of interest to declare.

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No data was used for the research described in the article.

## References

- Abdel Rahman, T. T., & El Gaafary, M. M. (2012). Elder mistreatment in a rural area in Egypt. *Geriatrics & Gerontology International*, 12(3), 532–537.
- Aciermo, R., Hernandez-Tejada, M., Muzzy, W., & Steve, K. (2009). *National Elder Mistreatment Study*. US Department of Justice.
- Adib, M., Esmaeili, M., Zakerimoghaddam, M., & Nayeri, N. D. (2019). Barriers to help-seeking for elder abuse: A qualitative study of older adults. *Geriatric Nursing*, 40(6), 565–571.
- Anetzberger, G. J. (1989). *Implications of research on elder abuse perpetrators: Rethinking current social policy and programming* (pp. 43–50). Elder Abuse: Practice and Policy.
- Avanci, J. Q., Pinto, L. W., & Assis, S. G. D. (2017). Treatment for cases of violence by Brazilian emergency services focusing on family relationships and life cycles. *Ciência & Saúde Coletiva*, 22(9), 2825–2840.
- Aylaz, R., Pekince, H., Isik, K., Aktürk, Ü., & Yildirim, H. (2020). The correlation of depression with neglect and abuse in individuals over 65 years of age. *Perspectives in Psychiatric Care*, 56(2), 424–430.
- Band-Winterstein, T. (2012). Narratives of aging in intimate partner violence: The double lens of violence and old age. *Journal of Aging Studies*, 26(4), 504–514.
- Band-Winterstein, T., & Avieli, H. (2019). Women coping with a partner's dementia-related violence: A qualitative study. *Journal of Nursing Scholarship*, 51(4), 368–379.
- Band-Winterstein, T., Smeloy, Y., & Avieli, H. (2014). Shared reality of the abusive and the vulnerable: The experience of aging for parents living with abusive adult children coping with mental disorder. *International Psychogeriatrics*, 26(11), 1917–1927.
- Block, C. R. (2013). Homicide against or by the elderly in Chicago 1965–2000. *Homicide Studies*, 17(2), 154–183.
- Bows, (2019). Domestic homicide of older people (2010–15): A comparative analysis of intimate-partner homicide and parricide cases in the UK. *The British Journal of Social Work*, 49(5), 1234–1253.
- Bows, H., & Westmarland, N. (2017). Rape of older people in the United Kingdom: Challenging the 'real-rape' stereotype. *British Journal of Criminology*, 57(1), 1–17.
- Bridges, F. S. (2013). Estimates of homicide-suicides among the elderly, 1968 to 1975. *Homicide Studies*, 17(2), 224–236.
- Burnes, D., Rizzo, V. M., Gorroochurn, P., Pollack, M. H., & Lachs, M. S. (2016). Understanding service utilization in cases of elder abuse to inform best practices. *Journal of Applied Gerontology*, 35(10), 1036–1057.
- Carmona-Torres, J. M., Carvalhal, R., Gálvez-Rioja, R. M., Ruiz-Gandara, Á., Goergen, T., & Rodríguez-Borrego, M. A. (2020). Elder abuse in the Iberian Peninsula and Bolivia: A multicountry comparative study. *Journal of Interpersonal Violence*, 35(21–22), 4303–4326.
- Chan, A. C., & Stum, M. S. (2022). A family systems perspective of elder family financial exploitation: Examining family context profiles. *Journal of Applied Gerontology*, 41(4), 945–951.
- Chang, M. (2019). Comparative study on subjective experience of elder abuse between older Korean immigrants in the United States and older Koreans in Korea. *The International Journal of Aging and Human Development*, 88(2), 187–210.
- Chokkanathan, S. (2018). Prevalence and correlates of elder mistreatment in Singapore. *Journal of Elder Abuse & Neglect*, 30(4), 271–283.
- Chokkanathan, S., & Natarajan, A. (2018). Perceived quality of life following elder mistreatment in rural India. *The Journals of Gerontology: Series B*, 73(5), e69–e80.
- Chokkanathan, S., Natarajan, A., & Mohanty, J. (2014). Elder abuse and barriers to help seeking in Chennai, India: A qualitative study. *Journal of Elder Abuse & Neglect*, 26(1), 60–79.
- Clarke, A., Williams, J., & Wydall, S. (2016). Access to justice for victims/survivors of elder abuse: A qualitative study. *Social Policy and Society*, 15(2), 207–220.
- Coelho, L., Ribeiro, T., Dias, R., Santos, A., & Magalhães, T. (2010). Elder homicide in the north of Portugal. *Journal of Forensic and Legal Medicine*, 17(7), 383–387.
- Dayan, H. (2022). Crime diversity: Sociocultural aspects of femicide in Hong Kong. *Journal of Interpersonal Violence*, 37(15–16), NP14431–NP14456.
- De Donder, L., Lang, G., Luoma, M. L., Penhale, B., Alves, J. F., Tamutiene, I., ... Verté, D. (2011). Perpetrators of abuse against older women: A multi-national study in Europe. *The Journal of Adult Protection*, 13(6), 302–314.
- DeLiem, M., Yonashiro-Cho, J., Gassoumis, Z. D., Yon, Y., & Conrad, K. J. (2018). Using latent class analysis to identify profiles of elder abuse perpetrators. *The Journals of Gerontology: Series B*, 73(5), e49–e58.
- DePrince, A. P., Olomi, J. M., Lee, M. S., Hasche, L. K., Casparian, A. M., & Pettit, L. L. (2020). Exploring an emerging measurement issue in older adult maltreatment: Exploitation of older adults' residences. *Journal of Trauma & Dissociation*, 21(2), 158–171.
- Dow, B., Gahan, L., Gaffy, E., Joosten, M., Vratsidis, F., & Jarred, M. (2020). Barriers to disclosing elder abuse and taking action in Australia. *Journal of Family Violence*, 35(8), 853–861.
- Drommi, M., Ponte, A., Ventura, F., & Molinelli, A. (2021). Elder abuse in Europe's "most elderly" city: An update of the phenomenon based on the cases reported to the penal court of Genoa from 2015 to 2019 and literature review. *Aging Clinical and Experimental Research*, 33(10), 2865–2871.
- Filipska, K., Bierciewicz, M., Wiśniewski, A., Kędziora-Kornatowska, K., & Ślusarz, R. (2020). Prevalence and associated factors of elder psychological abuse: A cross-sectional screening study, based on a hospitalized community from Poland. *Archives of Gerontology and Geriatrics*, 90, Article 104152.
- Frazão, S. L., Silva, M. S., Norton, P., & Magalhães, T. (2014). Domestic violence against elderly with disability. *Journal of Forensic and Legal Medicine*, 28, 19–24.
- Friedman, L. S., Avila, S., Tanouye, K., & Joseph, K. (2011). A case-control study of severe physical abuse of older adults. *Journal of the American Geriatrics Society*, 59(3), 417–422.
- Gerino, E., Calderera, A. M., Curti, L., Brustia, P., & Rollè, L. (2018). Intimate partner violence in the golden age: Systematic review of risk and protective factors. *Frontiers in Psychology*, 9, 1595.
- Ghodousi, A., Maghsoodloo, S., & Hoseini, S. M. S. (2011). Forensic aspect of elder abuse: Risk factors and characteristics. *Journal of Research in Medical Sciences: The Official Journal of Isfahan University of Medical Sciences*, 16(12), 1598–1604.
- Giezek, M., Bażydło, M., Ciechowicz, J., Masna, B., Zabielska, P., Tomczak, J., ... Karakiewicz, B. (2017). The results of the "blue cards" questionnaire analysis with respect to the incidence of violence among the elderly. *Family Medicine & Primary Care Review*, 19(1), 18–22.
- Gil, A. P. M., Kislalya, I., Santos, A. J., Nunes, B., Nicolau, R., & Fernandes, A. A. (2015). Elder abuse in Portugal: Findings from the first national prevalence study. *Journal of Elder Abuse & Neglect*, 27(3), 174–195.
- Habjanic, A., & Lahe, D. (2012). Are frail older people less exposed to abuse in nursing homes as compared to community-based settings? Statistical analysis of Slovenian data. *Archives of Gerontology and Geriatrics*, 54(3), e261–e270.
- Halicka, M., Halicki, J., Kramkowska, E., & Szafranek, A. (2015). Law enforcement, the judiciary and intimate partner violence against the elderly in court files. *Studia Socjologiczne*, 2(217), 195–214.
- Harbison, J. R. (2016). *Contesting elder abuse and neglect: Ageism, risk, and the rhetoric of rights in the mistreatment of older people*. UBC Press.
- Hazrati, M., Mashayekh, M., Sharifi, N., & Motalebi, S. A. (2020). Screening for domestic abuse and its relationship with demographic variables among elderly individuals referred to primary health care centers of shiraz in 2018. *BMC Geriatrics*, 20(1), 1–8.
- Homer, A. C., & Gilleard, C. (1990). Abuse of elderly people by their carers. *British Medical Journal*, 301(6765), 1359–1362.
- Jackson, S. L. (2016). All elder abuse perpetrators are not alike: The heterogeneity of elder abuse perpetrators and implications for intervention. *International Journal of Offender Therapy and Comparative Criminology*, 60(3), 265–285.
- Karbayaz, K., & Çelikel, A. (2017). The elder physical abuse reflected in judicial authorities in Eskisehir. *Archives of Gerontology and Geriatrics*, 73, 284–287.
- Karch, D., & Nunn, K. C. (2011). Characteristics of elderly and other vulnerable adult victims of homicide by a caregiver: National Violent Death Reporting System—17 US states, 2003–2007. *Journal of Interpersonal Violence*, 26(1), 137–157.
- Kim, T., Jeong, H., Han, J. W., Kwak, K. P., Kim, B. J., Kim, S. K., ... H... & Kim, K. W. (2018). Prevalence and risk factors of abusive behaviors in the caregivers of people with dementia in Korea. *Psychiatry Investigation*, 15(7), 677–686.
- Krienert, J. L., & Walsh, J. A. (2010). Eldercide: A gendered examination of elderly homicide in the United States, 2000–2005. *Homicide Studies*, 14(1), 52–71.
- Krienert, J. L., Walsh, J. A., & Turner, M. (2009). Elderly in America: A descriptive study of elder abuse examining National Incident-Based Reporting System (NIBRS) data, 2000–2005. *Journal of Elder Abuse & Neglect*, 21(4), 325–345.
- Kulakçı Altıntaş, H., & Korkmaz Aslan, G. (2020). Prevalence of elder abuse among community-dwelling older adults in Turkey and its associated factors. *Psychogeriatrics*, 20(1), 3–10.
- Kumar, P., & Patra, S. (2019). A study on elder abuse in an urban resettlement colony of Delhi. *Journal of Family Medicine and Primary Care*, 8(2), 621–625.
- 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.
- Leung, D. Y., Lo, S. K., Leung, A. Y., Lou, V. W., Chong, A. M., Kwan, J. S., ... Chi, I. (2017). Prevalence and correlates of abuse screening items among community-dwelling Hong Kong Chinese older adults. *Geriatrics & Gerontology International*, 17(1), 150–160.
- Lino, V. T. S., Rodrigues, N. C. P., Lima, I. S. D., Athie, S., & Souza, E. R. D. (2019). Prevalence and factors associated with caregiver abuse of elderly dependents: The hidden face of family violence. *Ciência & Saúde Coletiva*, 24(1), 87–96.
- Macassa, G., Viitasara, E., Sundin, Ö., Barros, H., Gonzales, F. T., Ioannidi-Kapoulou, E., ... Soares, J. J. F. (2013). Psychological abuse among older persons in Europe: A cross-sectional study. *Journal of Aggression, Conflict and Peace Research*, 5(1), 16–34.
- Mackowicz, J. (2019). Elder abuse in the family environment: Implications for education and practice. *Revista Dilemas Contemporáneos: Educación, Política y Valores*, 6(51), 1–18.
- McCreadie, C. (1996). *Elder abuse: Update on research*. London: Age Concern Institute of Gerontology, King's College, London.
- Meyer, S. R., Lasater, M. E., & García-Moreno, C. (2020). Violence against older women: A systematic review of qualitative literature. *PLoS One*, 15(9), Article e0239560.
- Miszurka, M., Steensma, C., & Phillips, S. P. (2016). Correlates of partner and family violence among older Canadians: A life-course approach. *Health Promotion and Chronic Disease Prevention in Canada: Research, Policy and Practice*, 36(3), 45–53.
- Molinelli, A., Ventura, F., Pinto, S. L., Drommi, M., & De Stefano, F. (2017). Elder abuse in Europe's "most elderly" city: An assessment of the phenomenon and an analysis of the data from the penal court of Genoa from 2010 to 2015. *Aging Clinical and Experimental Research*, 29(6), 1285–1290.
- Mouton, C. P. (2003). Intimate partner violence and health status among older women. *Violence Against Women*, 9(12), 1465–1477.



- Orfila, F., Coma-Solé, M., Cabanas, M., Cegri-Lombardo, F., Moleras-Serra, A., & Pujol-Ribera, E. (2018). Family caregiver mistreatment of the elderly: Prevalence of risk and associated factors. *BMC Public Health*, 18(1), 1–14.
- Patel, A. B., & Mishra, A. J. (2018). An empirical study of elder abuse in the state of Uttar Pradesh of India. *Quality in Ageing and Older Adults*, 19(2), 106–116.
- Pavšič Mrevlje, T., & Nivala, J. (2017). Victimization of the elderly in the municipalities of Ljubljana and Uppsala. *International Review of Victimology*, 23(1), 33–46.
- Penhale, B. (2003). Older women, domestic violence and elder abuse: A review of commonalities, differences and shared approaches. *Journal of Elder Abuse & Neglect*, 15(3/4), 163–183.
- Peterson, J. C., Burnes, D. P., Caccamise, P. L., Mason, A., Henderson, C. R., Wells, M. T., ... Lachs, M. S. (2014). Financial exploitation of older adults: A population-based prevalence study. *Journal of General Internal Medicine*, 29(12), 1615–1623.
- Policastro, C., Gainey, R., & Payne, B. K. (2015). Conceptualizing crimes against older persons: Elder abuse, domestic violence, white-collar offending, or just regular 'old' crime. *Journal of Crime and Justice*, 38(1), 27–41.
- Prévile, M., Mechakra-Tahiri, S. D., Vasiliadis, H. M., Mathieu, V., Quesnel, L., Gontijo-Guerra, S., ... Berbiche, D. (2014). Family violence among older adult patients consulting in primary care clinics: Results from the ESA (Enquête Sur la santé des aînés) services study on mental health and aging. *The Canadian Journal of Psychiatry*, 59(8), 426–433.
- Qu, L., Kaspiw, R., Carson, R., De Maio, J., Harvey, J., & Horsfall, B. (2021). *National Elder Abuse Prevalence Study: Final report*. Australian Institute of Family Studies: Australian Government.
- Ramsey-Klawnsnik, H. (2017) 'Older adults affected by polyvictimization: A review of early research', *Journal of Elder Abuse & Neglect*, 29/5: 299–312.
- Ribot, V. C., Rousseaux, E., García, T. C., Arteaga, E., Ramos, M. E., & Alfonso, M. (2015). Psychological the most common elder abuse in a Havana neighborhood. *MEDICC Review*, 17(2), 39–43.
- Roberto, K. A. (2017). Perpetrators of late life polyvictimization. *Journal of Elder Abuse & Neglect*, 29(5), 313–326.
- Roberto, K. A., McPherson, M. C., & Brossoie, N. (2013). Intimate partner violence in late life: A review of the empirical literature. *Violence Against Women*, 19(12), 1538–1558.
- Roncallo, A., Barranco, R., Molinari, G., Drommi, M., & Ventura, F. (2021). Homicide-suicides in the Genoa District (North-West Italy): A retrospective study from 2007 to 2018. *Romanian Journal of Legal Medicine*, 29(1), 20–27.
- Rosen, T., Bloemen, E. M., LoFaso, V. M., Clark, S., Flomenbaum, N. E., Breckman, R., ... Pillemer, K. (2019). Acute precipitants of physical elder abuse: Qualitative analysis of legal records from highly adjudicated cases. *Journal of Interpersonal Violence*, 34(12), 2599–2623.
- Salari, S., & Sillito, C. L. (2016). Intimate partner homicide-suicide: Perpetrator primary intent across young, middle, and elder adult age categories. *Aggression and Violent Behavior*, 26, 26–34.
- Sandmoe, A., & Hauge, S. (2014). When the struggle against dejection becomes a part of everyday life: A qualitative study of coping strategies in older abused people. *Journal of Multidisciplinary Healthcare*, 7, 283–291.
- Santos, A. J., Gil, A. P., & Ribeiro, O. (2019). The ageing process in older adults' narratives of family violence. *Quality in Ageing and Older Adults*, 20(2), 56–66.
- Santos, A. J., Nunes, B., Kislaya, I., Gil, A. P., & Ribeiro, O. (2017). Psychological elder abuse: Measuring severity levels or potential family conflicts? *The Journal of Adult Protection*, 19(6), 380–393.
- Santos, A. J., Nunes, B., Kislaya, I., Gil, A. P., & Ribeiro, O. (2019). Elder abuse victimization patterns: Latent class analysis using perpetrators and abusive behaviours. *BMC Geriatrics*, 19(1), 1–11.
- Sembiiah, S., Dasgupta, A., Taklikar, C. S., Paul, B., Bandyopadhyay, L., & Burman, J. (2020). Elder abuse and its predictors: A cross-sectional study in a rural area of West Bengal, eastern part of India. *Psychogeriatrics*, 20(5), 636–644.
- Shawon, R. A., Adhia, A., DeCou, C., & Rowhani-Rahbar, A. (2021). Characteristics and patterns of older adult homicides in the United States. *Injury Epidemiology*, 8(1), 1–11.
- Shibusawa, T., Iwano, S., Kaizu, K., & Kawamuro, Y. (2014). Self-reported abuse and mistreatment among Japanese elders receiving respite care. *Journal of Aggression, Maltreatment & Trauma*, 23(1), 67–80.
- Stanback, B., & King-Kallimanis, B. L. (2011). Older offenders and homicide: What can we learn from the Chicago homicide dataset? *Homicide Studies*, 15(1), 32–47.
- Stiles-Shields, C., & Carroll, R. A. (2015). Same-sex domestic violence: Prevalence, unique aspects, and clinical implications. *Journal of Sex & Marital Therapy*, 41(6), 636–648.
- Stöckl, H., Watts, C., & Penhale, B. (2012). Intimate partner violence against older women in Germany: Prevalence and associated factors. *Journal of Interpersonal Violence*, 27(13), 2545–2564.
- Straka, S. M., & Montminy, L. (2006). Responding to the Needs of Older Women Experiencing Domestic Violence. *Violence Against Women*, 12(3), 251–267. <https://doi.org/10.1177/1077801206286221>
- Sweilch, W. M. (2021). Global research activity on elder abuse: A bibliometric analysis (1950–2017). *Journal of Immigrant and Minority Health*, 23(1), 79–87.
- Tinker, A., Biggs, S., Manthorpe, J., & Erens, B. (2008). First National Prevalence Study of elder abuse and neglect in the UK: Findings and some policy implications. *The Gerontologist*, 48, 205–206.
- Titterton, V., & Reyes, N. (2010). Elder homicide in urban America: An exploratory analysis of Chicago, Houston and Miami. *Journal of Criminal Justice*, 6(3), 228–249.
- Tobiasz-Adamczyk, B., Bryski, P., & Bryska, M. (2014). Health-related quality of life in older age and a risk of being a victim of domestic violence. *Archives of Gerontology and Geriatrics*, 58(3), 388–398.
- Toda, D., Tsukasaki, K., Itatani, T., Kyota, K., Hino, S., & Kitamura, T. (2018). Predictors of potentially harmful behaviour by family caregivers towards patients treated for behavioural and psychological symptoms of dementia in Japan. *Psychogeriatrics*, 18(5), 357–364.
- Tyyska, V., Dinshaw, F., Redmond, C., & Gomes, F. (2012). Where we have come and are now trapped: Views of victims and service providers on abuse of older adults in Tamil and Punjabi families. *Canadian Ethnic Studies*, 44(3), 59–77.
- United Nations (2019) Global Study on Homicide. Available from: <https://www.unodc.org/unodc/en/data-and-analysis/global-study-on-homicide.html>.
- Vardhan, R. (2017). Elder abuse and elder victimization: A sociological analysis. *International Annals of Criminology*, 55(1), 99–113.
- Varker, T., Forbes, D., Dell, L., Weston, A., Merlin, T., Hodson, S., & O'Donnell, M. (2015). Rapid evidence assessment: Increasing the transparency of an emerging methodology. *Journal of Evaluation in Clinical Practice*, 21(6), 1199–1204.
- Ventura, F., Caputo, F., Micera, C., & Molinelli, A. (2020). Elder abuse: A retrospective analysis of autopsy cases from the department of legal medicine in Genoa from 2006 to 2017. *Journal of Elder Abuse & Neglect*, 32(4), 388–398.
- Warmling, D., Lindner, S. R., & Coelho, E. B. S. (2017). Intimate partner violence prevalence in the elderly and associated factors: Systematic review. *Ciência & Saúde Coletiva*, 22, 3111–3125.
- Weil, S., & Keshet, S. (2021). Female geronticide: The case of Israel. *Journal of Gender Studies*, 30(1), 39–51.
- Whittaker, T. (1995). Violence, gender and elder abuse: Towards a feminist analysis and practice. *Journal of Gender Studies*, 4(1), 35–45.
- Wong, J., Breslau, H., McSorley, E., Wroblewski, K., Howe, M., & Waite, L. (2019). The social relationship context of elder mistreatment. *The Gerontologist*, 60(6), 1029–1039.
- World Health Organisation (2012). Intimate partner violence. Available from: [https://apps.who.int/iris/bitstream/handle/10665/77432/WHO\\_RHR\\_12.36\\_eng.pdf?sequence=1](https://apps.who.int/iris/bitstream/handle/10665/77432/WHO_RHR_12.36_eng.pdf?sequence=1).
- Yan, E. (2015). Elder abuse and help seeking behavior in elderly Chinese. *Journal of Interpersonal Violence*, 30(15), 2683–2703.
- Yon, Y., Mikton, C. R., Gassoumis, Z. D., & Wilber, K. H. (2017). Elder abuse prevalence in community settings: A systematic review and meta-analysis. *The Lancet Global Health*, 5(2), e147–e156.
- Ziminski, C., Wigglesworth, A., Austin, R., Phillips, L., & Mosqueda, L. (2013). Injury patterns and causal mechanisms of bruising in physical elder abuse. *Journal of Forensic Science*, 9(2), 84–91.