The Lived Experience

By Elizabeth Podnieks

Major demographic changes over the past 50 years have brought attention to the problems and concerns of the elderly. Increased life expectancy and population have resulted in there being a growing number of persons over 65; and the aging of the population continues to accelerate. Statistics Canada (1985) estimates there will be 7 million older people in Canada by the first third of the twenty-first century. The increased population 65 and over has led to the prediction that, as a greater number of older persons become dependent on others for their care, there will be a concomitant increase in all problems experienced by the elderly — including elder abuse (Montgomery and Borgatta, 1986).

In Canada there has been a considerable amount of research conducted in the area of domestic violence. The focus has mostly been on the abuse of children by their parents and on the battering of women by husbands or lovers. Concurrent with such investigation has been the development of social programs to prevent these types of abuse, or to mitigate the effects of abuse when it occurs. Only in the past few years, however, have researchers and policy-makers directed their attention to the mistreatment of older adults.

This paper examines the lived experiences of 28 elderly women victims of maltreatment. It affirms their strength, hardiness and resilience in dealing with their “hardship.”

The social problem of elder abuse has been recognized only recently, although the abuse itself is not new. Definitions of elder abuse are confusing and unclear. Many researchers refer to the entire range of problems the elderly can experience as ‘abuse,’ including lack of proper housing, untreated medical conditions, and lack of social services. In this paper ‘abuse’ means any physical, mental or sexual injury inflicted on an older adult, including exploitation of such adult’s financial resources. Such harm may come about through neglect by a responsible person. Two other forms of elder abuse are powerful and pervasive: both the interventions of well-meaning professionals and the actions of family members who paternalistically believe they “know what is best” for the older person.

A recent Canadian national survey of 2,008 randomly-selected seniors who lived in private dwellings revealed that at least 4% of our aged population had recently experienced serious maltreatment at the hands of a partner, relative or other close contact. Material abuse accounted for the highest numbers of cases; this was followed by chronic verbal aggression, physical abuse and neglect. Nearly 19% of victims were victims of more than one form of maltreatment (Podnieks et al., 1980).

Participants in the study demonstrated strong feelings of guilt, self-blame and eroded self-esteem. About 30% of the abused persons felt it was their own fault that the abuser had mistreated them. More than one half of the victims said that their abuser asserted that the victims deserved the maltreatment. Most victims did not report their situation to the authorities. Clearly, the need to save face, not to admit one’s vulnerability, and not to betray a loved one are motivations of older persons. Gender was not a risk factor associated with elder abuse in this study. On a per capita basis, the rates of victimization for elderly men and women were nearly equal. The number of female victims is greater.

I had the opportunity to conduct follow-up interviews with 28 older women who had been identified as abused in the initial prevalence survey. Because there was little written on the lived experiences of elder abuse victims, my main goal was to have the older person look back over the years and tell me the story of her life events. From this data, themes emerged which provided a fresh perspective on the background and environmental interactions of the respondents.

Before starting the follow-up interviews, I was anticipating what might be the emerging concepts. The ones I had felt would be the best defining characteristics of victims were “powerlessness” and “learned helplessness,” which have been found to be a consequence of ongoing spouse abuse (Walker, 1984). I also thought “ineffective coping” might emerge as appropriate. In the process of recounting their life events, the informants placed their lives in perspective. The in-depth interviews allowed them to share their insights, perceptions and fears about their lives, including their experiences with mistreatment. It quickly became apparent that these elder people were anything but powerless or helpless. In the interviews the informants talked about personal and subjective experiences. They described how they had worked through life’s events (the Depression) and stages; they talked about coping and surviving.

The personality characteristic, hardiness, was described by Kobasa (1979). It is a capacity by virtue of which individuals remain healthy when encountering life stress. “Hardy” people are able to choose how they handle stress and can cope with stress. Most of the research on hardiness has been conducted on male executives and lawyers (Kobasa, 1979; 1982). Kobasa (1982) tested the relevance of the term to women and found that those high in stress...
but low in psychiatric symptoms documented significantly more commitment to work, family and self — components of hardiness — than those high on both stressful life events and psychiatric symptoms. Through the investigation of nurses (McCranie et al, 1987; Rich, 1985), attempts have been made to determine the relevance of hardiness to females.

Bigbee (1985) argues that, although hardiness may represent only one aspect of stress resistance, the implications of a thorough understanding of this personality characteristic appear to be immense. Once the scientific community is able to determine where it comes from, how it is developed and/or how it is learned, then researchers can begin to test effectively for hardiness in people who may be faced with stressful life events and take appropriate interventions before a low-hardiness individual experiences stress.

In many ways, the concept of hardiness is the opposite pole of the well-known concept of vulnerability. The victims of elder mistreatment identified in this study appear to be characterized by hardiness. They seemed to have a basic strength through which they were able to cope or adapt, and this theme has emerged over the life course. Their resilience has been described in their own words: “I have been strong,” “I was always able to manage.” The study did not permit a comparison of the hardiness of these older people and other non-abused elders.

Perhaps it seems inconsistent to label individuals who have been victims of elder abuse as “hardy” but, on reviewing the life experiences of these adults, it was abundantly clear that they had a realistic perspective on life and have been able to cope with “the hand dealt to them” — even when this meant enduring mistreatment.

Data were clustered under the headings: environmental factors, individual characteristics, and socialization. Space does not permit a description of all the core categories, but a discussion of several of them follows.

Environmental Factors

The Great Depression/World Wars

People talk about a recession today — you had to live in the thirties to know what poverty was.

There appears to be a continuity theme that connects social change and life experience: a theme of loss and adaptation — particularly in the 1930s — in the life course development of a cohort of older Canadians who were born in the early part of the century and who were victims of some form of maltreatment in their older years. Because of the prevalence of loss in the Depression and in later years of these individuals, the thesis is that their handling of mistreatment in old age reflects how they dealt with the problem of human and material loss during the 1930s. Of course, both earlier and later adaptations to loss are contingent on the severity of the deprivation and on the resources brought to the situation (Elder, 1982).

The main hypothesis relating Depression experiences to well-being in old age is as follows: one who has successfully coped with loss earlier in life builds confidence and resources for dealing with future trials. The informants in the study knew first hand about the deprivations of the 1930s: “What you can’t change you learn to live with.”

Westin’s (1976) oral histories recount how hard it was for a woman to lose her home; but strength sometimes came out of it. Such strength was also seen in the interviews in this study. Informants were usually proud of how they had handled events in their lives, including the instances of abuse situations.

Another link between coping in the Depression and coping through the life course was the important value of a woman’s independence. Most of the informants in the study had assumed responsibility for family income by entering the labour market. By having to work, by being on their own, these women acquired skills that would foster successful aging. Even recovering from the death of a spouse was a little easier if the woman had had a work-life of her own.

Living through the Depression may have shaped a model of self-reliant womanhood that is uniquely suited to the living requirements of widowhood. A “strong woman” image of Depression life appears in oral histories and in studies of families during this period (Elder, 1982). Survivors depict women as seemingly able “to develop the strength to survive anything ... they carried such a load” (Westin, 1976). Recollections of the Depression’s harsh toll on men are commonplace among the women: “Hard times hit father more than mother.”

Stress and Hardship

Victims of elder mistreatment were identified in the national survey as having a higher incidence of stressors than the non-abused sample. Stressors were often mentioned in follow-up interviews. Women sometimes referred to stress as “hardship” or “hard times.” They also referred to it as a causative factor in their abusive circumstances. At times it appeared as if they were excusing or possibly forgiving their abuser:

There were many ways he [the husband] treated me roughly and humiliated me. But he has had a very stressful life and I think this was something to do with the way he mistreated me and took it all out on me.

(Age 72, victim of physical and verbal abuse. Husband died after the first interview.)

The elder abuse literature abounds with references to the impact of stress in all forms of family violence and in dysfunctional families.

Psychopathology of the Abuser

A number of sources have mentioned
pathology as a common cause of elder abuse (Rathbone-McCuan, 1980; Lau and Kosberg, 1979; Wolf et al., 1984). Other research studies have questioned the association (Sengstock and Liang, 1982). Informants in this study often indicated that their abusers had mental or emotional problems or were substance abusers:

When he drank he was just wild—he was so violent I had to call the police. They would take him to the hospital and "drain" him—but then he would come back...
(Age 70, female, physical abuse)

Like the national survey, the follow-up interviews appear to support the assertion that psychopathologic characteristics of the abuser at least partially explain why elder abuse occurs.

Social Support: Giving and Receiving

Social support is frequently identified as an important moderator of life stress and pathology (Anetzberger, 1987) and may prevent family tension from rising to unmanageable levels in a conflicted environment. Pillemer and Wolf (1986) argue that the presence of interested outsiders can make it more difficult to abuse an elderly relative. Lack of adequate social and emotional support as well as community resources can cause or exacerbate elder abuse. There was a close relationship between social isolation and loneliness:

I never had any appreciation from my husband. I was like a single mother—raising the children alone—but he never said "you did good."
(Age 68, victim of verbal abuse by husband)

That's one thing I really notice from the old days—neighbours were really neighbours—they were there for you—you could count on them. Now everyone works—there is much less neighbourliness. A TV set does not replace a human being coming over for a cup of tea.
(Age 70, verbally abused by husband)

Not all informants reported a lack of social support. Many acknowledge support received, and giving support:

I have always shared—I feel badly when my grandchildren don't see this as important.

Marriage

Informants in this study described their marriages. In Finkelnbor and Pillemer's (1987) case-control study, a high degree of marital conflict was associated with abuse. Many women who had lost a spouse spoke warmly about their marriages and the years they had shared together. Others described more difficult situations which indicated personal distress:

My father was an alcoholic. He was very violent and we were all scared of him, but my mother lived at a time when you never walked away from a marriage—once you entered a marriage you took whatever came your way. My own marriage is not happy either.
(Age 69, married female, victim of verbal aggression by her husband)

Political Climate

Older adults are politically aware; participants were vocal in protesting government policy. Informants were concerned about life for both young and old:

I am really worried about the Canadian economy—we all want so much but we don't want to work for it—take my grandchildren—they just don't want to work.
(Age 75, female)

INDIVIDUAL CHARACTERISTICS

Sense of Self

In considering esteem, it was apparent that many informants were able to identify their own strengths, especially if they had been in a caregiving role to an elderly parent or spouse for a long time. Some were proud of their accomplishments. Many valued connecting with others and being helpful. Some identified feelings of inferiority: "I am not in the same class as the others on my street—they are better educated." Others felt very good about themselves. They were proud of how they raised their children, even the children that had been "out in left field" for a period of time, even ones who had been their abusers.

Inner Strength

Informants were asked where they located their inner strength in their times of conflict and crisis within the abusive situation. Some replied, "By living day by day." They appeared to develop inner resources in the course of doing what had to be done. "What has sustained me [when her husband mistreated her] was sheer guts." "Religion has been my strength."

Informants also were able to admit when they felt they had no inner strength. As one woman stated, "There were times when I had nothing to draw on, I was hollow inside."

Independence

Victims defined themselves as independent. In an age cohort for which dependence on men was the norm, women victims in this study developed styles of relative independence. They came across as being very strong, very sure of themselves. One respondent described how her husband relied on her to look after their finances even though he abused her. This responsibility made her feel in control in this respect, if nothing else.

However, it was interesting to observe that informants reported that inner strength was...survival and growth: "I couldn't have survived [the mistreatment] without having a sense of humour."

Depression

Depression was indicated when informants talked about wishing that their lives would end.

My own family was loving and so it is very hard for me to find myself the victim of an abusive husband. I really wish my life would be over—finished—I have thought about suicide—but I don't think I would actually do it.
(Married, age 71, physical and verbal abuse)

Sense of Future

Many respondents spoke about the future and their own mortality. They spoke about their hopes of aging in place and of remaining in control. They were concerned about the future for their loved ones. Pessimism was sometimes articulated in relation to the future: "There will be another
war." In general, although some depression was noted throughout the interviews, informants are not unduly worried about the future: "I have had a good life and I am ready to go."

Reminiscence

Reminiscing has been viewed as a particularly adaptive function at the later stages of life. Butler (1963) discusses the way older people review their past as they try to make order and meaning and reconcile conflicts and disappointments in preparation for dying. The concept of reminiscing is also useful in crisis and grief resolution and can be seen as a fitting tool for victims of elder mistreatment. Recalling early memories is a helpful coping style of older persons. Informants in this study may have had to confront problems that could not be eliminated or logically resolved, so they sought other mechanisms that might help them successfully cope. Ebersole and Hess (1990) state that memories that remain over time serve a person in many ways throughout life and have tremendous influence as reservoirs of problem solving. Victims in this study probably derived strength for the present from their values and aspirations of the past.

Socialization

Gender Roles

On occasion the women informants commented on the difficulty of women living on their own:

People don't want to be bothered with a woman who is a widow. Women have to put up with things that men don't.

Others have identified times when others have tried to "put things over" on them and related this to being a woman. The Depression literature, cited earlier, describes the economic crisis which propelled women into the work force where many of them remained over the decade. Women in the study recounted that work for them has become a central life interest, a source of personal satisfaction and identity. This is noteworthy in light of women's place in the work force where women have been traditionally segregated in female "job ghettos," underpaid and underpromoted (McPherson, 1990).

In keeping their mistreatment a secret, women are in a way assuming responsibility for the violence of another person, probably a man. This in itself may not be surprising, since it was not too long ago that Members of Parliament laughed as one Member described abusing his wife.

Women's values were seen in comments about the importance of the community, the neighbourhood, and other individuals. They reported a sense of satisfaction in helping others and did not express any need or expectation of reciprocity. Many women described how they had refused services, saying, "There are others much worse off than me."

The strength of women, even those who now are somewhat frail, flows through their life biographies and displaces the stereotype of women as powerless and vulnerable. The women who stayed in abusive situations may have done so because of their religious views on divorce or because separation would have carried a tremendous social stigma within their community. Barriers to action are often great for women from certain social, ethnic or cultural groups. The women in this study described their past experiences within the context of a lifetime of hard work. Their self-reliance from years of adapting during the Depression and World Wars reveals a pattern of coping strategies which enabled them to survive conditions of poverty, lack of medical services and lack of opportunities. Work was a life course continuity that dominated their childhood and adulthood and extended into old age, where their work has been connected to caregiving and community responsibilities. Women in the study report on peer relationships as being very important. They also describe things that contributed to life satisfactions (such as leisure activities with their families, self directed learning, acquiring new skills and being at ease with themselves).

Caregiving

The caregiving literature often addresses the strain of providing care to an older parent (Connidis, 1989). I am discussing caregiving cases where informants identified their caregiving roles as they described life events. Even people who were experiencing maltreatment appeared to be able to carry out caregiving roles, sometimes to their abusers. Caregiving had often been part of their lives. One informant revealed that she was babysitting when she was five years old. Informants have been providing care to a variety of kin regardless of variations in the quality of their relationship and in the competing demands of their lives:

My stepmother was very mean to me when I was a child. She would smack me, things like that. When she got older and sicker she came to me and said she expected me to look after her. Her own daughter abandoned her. I looked after her until she died.

How did she feel about caring for someone who had abused her earlier in life? "I let the past be forgotten" (Age 78, widow, abused by stepsister).

Intergenerational Relationships

Informants were most concerned about generativity and the future of children.
They expressed fear that children today were not getting enough education. This was something that was unavailable to them when they were growing up in the Depression and they wanted to be sure that their grandchildren used the opportunity. Informants spoke of their own parents' distress when the informants had to leave school to get a job and help with the family responsibilities in their early years.

Although the study did not identify a great many cases of older people being either abandoned by or alienated from their families, a number of informants reported, with sadness, a lack of family solidarity:

I have four children, but they rarely come to visit. They are pushing me towards a nursing home, but I don't want to go.

(Age 93, widower, material abuse by cousin)

My children wouldn't want to be stuck with looking after me — but what do you expect? Kids today wouldn't look after old people the way we used to do.

(Age 74, widow, material abuse by friend)

Learned To Live with Abuse

Why did these older victims stay in abusive situations? Informants offered explanations:

I had to decide whether to stay and "tread the proper path" according to him or to leave. I stayed and it's OK because as long as I don't upset him he is not too bad. Now that doesn't mean that I like what he is doing to me...

(Age 68, verbal abuse by husband)

Informants were often resigned to the situation. As one woman whose son was tricking her into giving him money stated, "It's made me feel badly but what can you do? — life goes on." Another informant stated that abuse was very hard to take but that "older people often have to go through that — especially when your children are involved." Yet another comment was that older women are much more likely to get taken advantage of and be mistreated. It is important to note that in most cases, the informants made their own choice. This gave them a sense of control.

Keeping Abuse Secret: Loyalty

The under-reporting of elder abuse has been cited in the literature (Johnson, 1991) and the hypothesis is supported in this study.

Once when my son hurt me badly I had to go to the hospital. The doctor asked me a lot of questions. I said to him "do I have to tell you?" — he said, "Yes." He wanted to know where I got all the bruises. I can't really talk about the abuse with anyone — I am surprised I am telling you but if this information will help anyone else then I am glad.

(Age 77, widow, physical abuse and material abuse by son)

I don't share my feelings with anyone. I never told anyone about my husband's violence, and I would never report him to the police even though I was very afraid he would kill me the next time.

(Age 78, physical abuse by husband)

Informants arguably demonstrated loyalty in having kept their secrets within the family. Although they described maltreatment which had occurred during their early years, the informants rarely criticized their parents. Now in later life they pointed out their abuser's good points "He could be kind." This might also be construed as a form of self-denigration.

I have not described the types of abuse suffered by the older women in this study, but they could be placed on a continuum ranging from emotional deprivation to knives being thrown at them; from neglect to permanent loss of mobility due to broken bones. I would now like to make a few suggestions for interventions which would be useful to elderly victims of abuse.

INTERVENTIONS

Peer Counselling

It has been demonstrated (Breckman, 1988) that elder abuse victims often relate well to others who have experienced similar situations of abuse. There are many factors which are directly related to being an older victim, and peers who have had specialized training in the intervention of elder mistreatment are best positioned to help other, older individuals. Support groups for victims are particularly useful in decreasing victim isolation.

Telephone Counselling

Informants in this study were very willing to discuss their problems in abusive situations. The telephone methodology allows for privacy and enhances the informants' level of comfort because they know that they are in control of the interview. Transportation would not be a problem; the service could be available on a flexible hour basis to meet the needs of the clients. Telephone counselling would be especially appropriate for those living in rural areas and unable to access services (one-third of this sample lived in rural areas).

Alternate Living Options

There is a need for shelters and group homes, both temporary and permanent, for older individuals who must be separated from their abusers for a period of time or, in some cases, permanently. Present shelters are already overcrowded with younger people, and many are inadequate for older adults' particular needs.

Prevention

Many of the victims identified and surveyed in the two projects mentioned here stated that they were remaining in the situation. They did not want any professional action to assist them and they definitely did not want criminal charges placed against their abusers. Thus it is essential that we educate all citizens to prevent elder abuse from occurring. Such education should start with early childhood education and be threaded through the earliest curriculum and through the professional schools. Seniors themselves must become more assertive and aware of their rights, so that they do not let themselves be exploited or harmed. Pre-retirement courses can be directed towards educating middle-aged individuals and encouraging them to make decisions about their futures; for example, how do they want their assets distributed, whom do they trust to receive power of attorney, do they want to complete a living will? Educational groups need to be developed for abusers. Society as a whole must relinquish the ageist attitudes that have been so prevalent in the recent period.
Education

Education and training on the special and unique needs of abused older women is essential. There is also a need to have older women represented on staff, boards of directors and in volunteer agencies so that the older women’s experiences, perspectives and struggles will be recognized and validated. The women’s movement must assume much greater responsibility in addressing the plight of older women in abusive situations.

Conclusion

Hardiness, described earlier, was shown in the way these women were able to negotiate their way through tragedies and changes and to cope with hardship. They showed a positive regard for their own ability to cope and to endure. This resilience was revealed in the accounts of how the informants lived day-by-day and learned to accept what could not be changed. The informants characterized themselves as being in control or in charge of their lives: “I always managed.” These informants are at that stage of their lives where they want peace, tranquility, love of family and most of all, independence. Some are out of their abusive circumstances. Others have no way out. But the choice has been theirs and they say they are comfortable with whatever decisions they have made.

It is critical to balance the optimistic picture presented here of a hardy, resilient older individual with the very realistic understanding that these people have been harmed, physically, emotionally and financially. They have survived — but the damage and the suffering are still there, whether they acknowledge it or not. People in bad situations usually try to accommodate to that which is livable. They do not want to see or tell just how terrible things actually are. For example, one woman said of her abusing son, “He really is a good boy.”

One cannot conclude this paper without mentioning the issue of the consequences of elder mistreatment. Three victims died between interviews, and it is not known how they died. The possibility is that their deaths may have been a result of their maltreatment. Hence, our conclusions may be distorted because only survivors could be interviewed. Future studies with longitudinal design will be able to get a more accurate picture of the consequences of elder abuse.

An important insight gained from this study is that abused elder people will talk about their mistreatment and for some it can be very therapeutic. In this survey, they revealed that they had not previously discussed their maltreatment with anyone. Investigators, rather than being reluctant to address victims themselves and interviewing professionals, can now confidently design studies including interviews with the victims of elder abuse.

This study has demonstrated the need for qualitative research to obtain more data about the lives of older people as perceived by them. We must make the elderly partners in the research to find out the sources of meaning held by them, how they come to terms with their lives (including the abusive situations), how they are able to put it all together.

Pressure from community and service agencies, along with grass roots organizations and senior groups has propelled the government into committing large funding resources towards the study of elder abuse. Provincial legislatures are hastily reviewing adult protective legislation. Ontario has a new advocacy package ready for a second reading. Everyone seems to be jumping on the “let’s rescue the elderly” bandwagon. It would appear that we are falling into the “victimization trap” and are focussing on the problems and deficits of the elder adult in dealing with maltreatment circumstances and are ignoring the evidence of adaptive strengths displayed by the “victims.”

The present study showed how they have used their personal strengths and social resources to effectively address their situations. We treat people who stay in abusive situations as if they are sick. We look for medical labels and diagnoses for the “victim.” I believe that instead we should ask them what they want. It could be as simple as arranging direct deposits of their pension cheques and automatic billing for their utilities.

Many of the elderly women have lifelong work patterns. They did not re-enter the workforce in the 1960s or 1970s; they never left it. These are individuals whose greatest wish is to maintain a capacity for self-care and independence, to avoid becoming a burden on others.

As we use these individuals as research subjects, as we plan services for them, as we explain their behaviour through a multitude of theories, let us stop to consider who is at the centre of this plethora of activity — the older individual.

References


DOROTHY LIVESAY

Sorcery

My breasts are withered gourds
my skin all over stiffens
shrinks—the pubic hair
bristles to an itch

Not to be touched and swept
by your arm’s force
gives me the ague
turns me into a witch

O engineer of spring!
magic magic me
out of insanity
from scarecrow into girl again
then dance me toss me catch!

Weather Forecast

O what a horn
blowing defeat
through the bare limbs
of trees

Tenderly
I gather a few delicate
leaf shells
to carry into the house
for safety

It’s the sixtieth year
of my life
and I discern
that spring is still
a verifiable
possibility!