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Minimal research has investigated disclosure/nondisclosure of abuse of older adults. To address this gap, this exploratory, qualitative study gathered the perspectives on reporting of elder abuse from 10 service providers working with elder abuse survivors across Alberta. Face-to-face and online interviews were conducted, audio-recorded, transcribed, and thematically analyzed. Four major barriers to abuse disclosure for older adults were identified. First, complex parent/adult-child relationships reduce the likelihood of disclosure among older adults who are experiencing abuse perpetrated by a family member; the corollary is that disclosure for non-familial perpetrators results in higher rates of disclosure. Second, older adults residing in rural and remote locations face greater barriers to disclosure compared to those residing in urban/suburban settings. Third, older adults are unlikely to report even if they recognize that they are in a situation of abuse, as a consequence of their internalized ageist beliefs that policing and social services agencies have more pressing needs to address than their well-being. Finally, local policing bodies and legal authorities may inadequately serve older adults facing abuse, particularly in cases of non-physical abuse, due to prioritized client and community needs. This study highlights the need for additional supports and service provision for vulnerable older adults in Alberta, specifically for those residing in rural and remote regions and those dependent on family members. It also points to the critical need for a greater understanding and awareness of violence against older adults among the general public and those tasked with ensuring the safety and well-being of older adults.

CHILD ABUSE AND ADULT MENTAL HEALTH: DOES GENDER MATTER?

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- 1. Wayne State University, Detroit, Michigan, United States,
- 2. Syracuse University, Syracuse, New York, United States,
- 3. University of Michigan, Ann Arbor, Michigan, United States Numerous studies have demonstrated that child abuse is associated with poor adult mental health, but few have investigated the extent to which the frequency of different types of abuse increase mental health conditions, especially at the nexus of gender. The present study examines whether parental abuse frequency and abuse perpetrator have distinct effects for men and women on three mental health outcomes-depressive symptoms, generalized anxiety, and global self-reported mental health. Data came from three waves of the National Survey of Midlife Development in the United States (MIDUS), comprising a baseline sample of 3,032 adults aged 25-74. Estimating a series of mixed effects models revealed that maternal abuse and frequent abuse during childhood were associated with poorer adult mental health during our 20-year observation period, net of childhood and adult risk factors. Specifically, maternal emotional abuse raised the risk of depression, anxiety, and lower selfrated mental health, and was more strongly associated with depression and anxiety for women than men. Compared to

adults who did not experience parental abuse during child-hood, adults who experienced frequent emotional and physical abuse by either parent were more likely to experience depression and anxiety and report lower ratings of mental health in adulthood. Frequent child abuse was more strongly associated with anxiety for women than men. These results demonstrate that gender differences in adult mental health have early-life antecedents. Future research investigating the long-term mental health consequences of child abuse should consider the type and magnitude of abuse as well as the perpetrator.

SERVICE PROVIDERS' PERSPECTIVES OF UNDERREPORTING ABUSE OF OLDER ADULTS IN ALBERTA, CANADA

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UPDATING AND TESTING THE PASRR SCREEN IN KANSAS: REAL WORLD IMPLICATIONS

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Kansas is updating the PASRR (Preadmission Screen and Resident Review) Level 1 screen per new guidance from the