

A SYSTEMATIC REVIEW AND META-ANALYSIS OF AGE-RELATED DIFFERENCES IN TRUST

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This systematic review and meta-analysis quantifies the magnitude and breadth of age-related differences in trust. Thirty-eight independent data sets met criteria for inclusion. Overall, there was a moderate effect of age group on trust ($g = 0.22$), whereby older adults were more trusting than young adults. Three additional meta-analyses assessed age-related differences in trust in response to varying degrees of trustworthiness. This revealed that older adults were more trusting than young adults in response to neutral ($g = 0.31$) and negative ($g = 0.33$), but not positive ($g = 0.15$), indicators of trustworthiness. The effect of age group on trust in response to positive and neutral cues was moderated by type of trust (financial vs. non-financial) and type of responding (self-report vs. behavioral). Older adults were more trusting than young adults in response to positive and neutral indicators of trustworthiness when trust was expressed non-financially, but not financially. There was also an age-related increase in self-reported, but not behavioral, trust in response to neutral cues. Older adults were more trusting than young adults in response to negative indicators of trustworthiness regardless of the type of trust or type of responding. The reliability of information about trustworthiness (superficial vs. genuine cues) did not moderate any effects of age on trust. Implications of these findings and directions for future research are discussed.

CHALLENGES AND BARRIERS FOR SERVICE PROVIDERS IN RURAL SETTINGS: AN ELDER-ABUSE NEEDS ASSESSMENT

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There has been concern about the increasing prevalence of elder abuse in the rural settings. This trend has called for more coordinated efforts to address elder abuse in the rural community. The current literature regarding elder abuse suggest there is more to learn about systematic obstacles service providers face. The framework applied in this study include elements of Bronfenbrenner's Bioecological model, showing a multilevel application to the obstacles agencies encounter when supporting else abuse victims. Little research has been conducted on the providers who work with elders in the rural context. In this study, based on the needs assessment of Iowa, we have examined the perceived barriers service providers face. Our sample included 222 providers across Iowa who took an online survey. The survey was initially sent to members of the Coordinated Community Response team of Iowa. Our findings indicated that service providers revealed multilevel challenges (i.e., individual vs. organization level) in working with elder abuse cases. Service providers' perceived effectiveness training was negatively associated with the quality of training they evaluated ($\beta = .24$, $p < .05$). The data also showed us that a large portion of agencies offered no training and education on elder abuse. Common themes described by the providers as barriers to addressing abuse was lack of education, social isolation, low awareness and ageism. These results highlight

that training for elder abuse in the rural setting needs multi-level systematic efforts.

ABUSE, NEGLECT, AND EXPLOITATION IN ASSISTED LIVING: AN EXAMINATION OF LONG-TERM CARE OMBUDSMAN COMPLAINT DATA

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Adult Protective Services (APS) has seen cases of elder abuse increase recently and older adults living in long-term care facilities are subject to abuse, neglect and exploitation (ANE) at higher rates than community-dwelling seniors. However, there is scant empirical literature about ANE in assisted living (AL) settings and skilled nursing facilities (SNFs). The purpose of this study is to examine ANE complaints in AL and SNFs as recorded by Long-term Care Ombudsman Programs (LTCOPs) utilizing secondary data from a state-wide database as well as an agency database used by staff ombudsmen who work in a large Metropolitan city in Texas. The sample included 140,497 complaints made at 1,940 licensed ALs with approximately 45,107 residents and 1,231 SNFs with 93,932 residents in Texas from 2010-2017. The percent of total complaints coded as ANE was higher in AL (2.01%) than in SNFs (1.46%) ($p < .001$). However, after controlling for number of residents, the rate of total ANE complaints per resident was higher (0.019) in SNF compared to AL (0.007) ($z = -17.221$, $p < .001$). The incidence of financial exploitation was significantly higher in AL (23.46%) than in SNF (11.90%) ($z = 5.582$, $p < .001$). The percentage of verbal/psychological abuse in SNF (34.78%) was significantly higher than that in AL (23.4%) ($z = -2.238$, $p < .05$). Study findings contribute to the knowledge about the prevalence and nature of ANE in long-term care communities and bolster support for increased AL ombudsman presence, staff training, resident-centered care models, and AL oversight.

FINANCIAL DECISION MAKING SELF-EFFICACY IN COGNITIVELY AND FINANCIALLY VULNERABLE OLDER ADULTS

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Financial decision making self-efficacy (FDMSE) is a novel construct that may influence how older adults make financial decisions. Our previous research with a community sample of older adults demonstrated that cognitive functioning and suspected history of financial exploitation were both associated with low FDMSE. We sought to replicate these findings in two clinical samples of older adults: people with mild cognitive impairment (MCI) or probable Alzheimer's disease (PAD) and current victims of scams or exploitation as determined by a financial coach. Samples were obtained from the Michigan Alzheimer's Disease Center and a financial coaching intervention study. All participants completed a 4-item FDMSE measure. One-way ANOVAs, t-tests and chi-square tests were conducted to test for group differences with controls on demographics. There was a main effect of cognitive status on FDMSE, $F(2,138) = 8.10$, $p < .001$, which was driven by higher FDMSE in the healthy group ($N = 63$)

than the MCI (N = 76) or PAD (N = 28) groups. Similarly, scam victims (N = 25) had significantly lower FDMSE than non-exploited (N = 25) peers, $t(48)=2.33$, $p < .05$. Cognitive impairment and current financial scams are both associated with low FDMSE levels. Low FDMSE may exacerbate cognitive and psychosocial vulnerabilities that contribute to risk for poor financial decisions among older adults. Future interventions to enhance FDMSE may help older adults make better decisions despite changes in thinking abilities or previous negative financial experiences.

TECHNOLOGICAL AND FINANCIAL PREDICTORS OF FEAR OF FINANCIAL ABUSE AMONG OLDER ADULTS

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Much research has focused on elder abuse. Less research focuses on fear of abuse. This analysis examines the associations between feelings of technological competence and variables assessing financial confidence with fear of financial victimization. Data were collected among community dwelling older adults in Nevada (n=467). Questions were asked regarding technological competence, confidence in navigating the financial system, asset protection, trust in financial institutions, and previous financial abuse victimization. The outcome was assessed by asking how afraid the respondent was of becoming a victim of financial abuse. Multivariate logistic regression models were run controlling for confounding. Controlling for all covariates, those who reported feeling unconfident in their technological competence had 2.5 times the odds of being afraid of financial abuse compared with those who felt confident ($p < 0.02$). Those who reported feeling like their assets were at risk had 4.12 times the odds of being afraid of financial abuse ($p < 0.0001$). Older adults who reported feeling vulnerable to financial victimization had 9.4 times the odds of being afraid of financial abuse compared with those who felt invulnerable ($p < 0.0001$). Those who were previously victims of financial abuse had 4.33 times odds of being afraid of financial abuse compared with those who had no history of financial abuse ($p < 0.0001$). Feeling confident in the financial system, asset protection, fear of credit card use, and trust in financial institutions were not associated with fear of financial abuse. These data provide a better understanding of fear of financial abuse, which will allow for better prevention of this issue.

USING DATA SCIENCE TO GENERATE PSYCHOSOCIAL PROFILES OF FINANCIAL EXPLOITATION IN SENIORS

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Financial exploitation (FE) in older adults is a significant public health problem linked to outcomes including depression, financial ruin and early mortality. This study applied exploratory data science techniques to a multi-year statewide protective services dataset of over 8,000 elder abuse cases. The goal was to derive data-driven psychosocial profiles of abuse with an emphasis on determining which factors, commonly shared across abuse cases, were most important for determining when elder FE was occurring and whether it was occurring alone or in conjunction with other types of abuse.

We found that pronounced psychological distress (i.e. verbalizing suicide, homicide, self-harm) was most important for indicating when abuse had occurred and predicted non-FE related abuse. Drug paraphernalia in the home and perpetrator drug/alcohol use were important predictors of FE-related abuse. When differentiating pure FE from hybrid FE, factors indicative of long-term FE occurrence and substantial financial loss were most important (i.e. facing foreclosure, lack of food, medications, and utilities). The findings parallel some existing work characterizing pure and hybrid FE, but also highlight new profile factors that may help determine when FE is occurring and when it is less likely. Applying data science approaches to other large protective service datasets and national datasets such as the National Adult Maltreatment Registry could help improve characterization of abuse types such as pure and hybrid FE resulting in better detection, response and prevention.

PERPETRATOR DEMOGRAPHICS ASSOCIATED WITH ADULT PROTECTIVE SERVICES—CONFIRMED FINANCIAL EXPLOITATION CASES

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Financial exploitation (FE) in older adults is a significant public health problem linked to outcomes including depression, financial ruin and early mortality. Studies have demonstrated risk factors associated with FE, but less is known about perpetrator characteristics. We performed a secondary data analysis of over 16,000 reported cases of FE utilizing a cross sectional design. Using multivariate logistic regression, confirmed and unconfirmed cases of FE were predicted from the following perpetrator demographics: age, gender, marital status, ethnicity, relationship to the victim, living status, and histories of drug abuse, alcohol abuse, and mental illness. Significant perpetrator demographics predicting confirmed FE were separation/divorce (OR=1.48), identifying as White (OR=1.33) or Black (OR=1.44), being a daughter (OR=1.61), son (OR=1.75), grandchild (OR=2.72), or other family member (OR=1.41), not residing with the victim (OR=2.32), and having a history of drug abuse (OR=2.56), alcohol abuse (OR=1.80), or mental illness (OR=1.91). These findings are based on a large statewide dataset and describe important perpetrator characteristics that could potentially be targeted for both intervention and prevention programs. This is especially important as many victims are reluctant to seek criminal action against a family member or trusted individual. This information is valuable as it may help APS, who has limited funding and staff, investigate and intervene in more difficult elder abuse FE cases.

POLICIES AND PREVENTION OF U.S. WOMEN'S VIOLENT DEATH ACROSS AGES

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U.S. violent death rates (homicide and suicide) are the highest in the developed world. Of all female murders (femicide), the majority are male perpetrated, intimate partner violence (IPV- 55-63%). Men are more often killed and by other male acquaintances, with only 2.8% IPV. Proportionally, older women (50+) have the top homicide victim rate (26%) among women. The baby boom cohort has