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Elder Abuse in Illinois: A Two‑Pronged Approach to Assessing the State's Response

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Abstract

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MA, Western Illinois University, 2012

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Dissertation Submitted in Partial Fulfillment

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Doctor of Philosophy

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Abstract

The Adult Protective Services Program is tasked with enforcing the standards and policies created at the federal level relating to how provider agencies should respond to elder abuse. What has yet to be explored is whether the Adult Protective Services Program is efficiently responding to the issue of elder abuse through its monitoring and evaluation protocols, which are based on the current policies. The purpose of this study was to explore the role of the 13 planning and service areas in their response to elder abuse. The response to elder abuse is guided by the current policies and funding strategies and has determined that there is a need for a policy change. The primary research questions sought to determine if the current policies were effective in every aspect, from planning to execution of the policies as well as the funding in guiding the level of response to elder abuse. The narrative policy framework was used to assess the feelings and opinions of the 13 directors of the planning and service areas regarding the current policies and response strategies to elder abuse. The study utilized a qualitative methodology that procured data through methods such as interviews and secondary data. Content analysis and coding were the two main strategies for analyzing the data for this study. Key results indicated that the directors felt restricted in term of the current policies, while funding has remained stagnant despite an increase in new programs. A change of policy that allows more freedom for investigating elder abuse is needed, as well as a reinvigoration of funding in the area of elder abuse.

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Dedication

This dissertation is dedicated to my mother Victoria Ann Pass & to the memory of my grandparents Nancy Marie Urso & Mario J. Urso Sr.

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Chapter 1: Introduction to the Study

Introduction

Elder abuse is a social issue that plagues society with victims suffering silently. This topic was one that required extra care due to its complex nature. This study helped to create awareness and the drafting of new strategies that could be implemented to address this issue in a more precise manner, which was more self-evident and clearer after the collected data were analyzed. This study shone light on current policies that were utilized by the 13 planning and service areas and determined that a problem existed. This study also explored the funding issued at the federal, state and local nonprofit level, and the effect funding had on the type of response given to cases of elderly abuse in the state of Illinois. The study determined that the amount of funding influenced how elder abuse was handled. The issues of funding were explored through the amount given at each governmental level in the state of Illinois. A major significance of this study was to help improve the lives of the current elderly population. The study also determined that there were flaws in the current system based on the collected data.

The social implications of this study were significant in that; the findings, encouraged positive social changes through possible policy reform that would give a better life for the elderly who will know that there are adequate resources that they can take advantage of when confronted with abuse. Another positive social change implication was that not every elderly individual is educated on the available resources. Educating the elderly will be part of any new potential policy reform, which was discovered during this study and was determined based on the findings in this study.

Inspiring positive social change was also another motivator or reason for this study. Other beneficial properties of this study are that it contributes to society by generating awareness as to how to care for its elderly population in an effective manner as the elderly population is as important to any society as any other segment of the population.

This first chapter introduces the research, the elements that shaped the study, the problem statement, the purpose of the study, research questions, theoretical framework, nature of the study, definitions, assumptions, scope of the study, limitations of the study, and the significance of the study. The purpose of this chapter was to establish the foundation of the study so that the reader is familiar with how the study sought to deliver its message on the topic of elderly abuse. This chapter, through the presentation of rigorous research, allows the reader to view the type of study being conducted and how it was structured so that the study is easier to comprehend.

Background

This study explored essential ideas such as the Adult Protective Services, and it was, therefore, crucial to give well-informed background information concerning vital concepts regarding elderly abuse. By displaying how current policies came to be in the state of Illinois this background information helps to convey how important this study is and how it achieved one of its objectives, which was to increase the knowledge base.

According to the Illinois Department on Aging (2018d), four critical statues influence the manner in which elderly abuse is handled; the Older American Act; the Illinois Act on the Aging, 20 I.L.C.S.§ 105; the Adult Protective Services Act, 320 I.L.C.S. § 20; and Older Adult Services Act, 320 I.L.C.S. § 42. The Older American Act

was created at the federal government level during 1965 as a response to the lack of community programs for the elderly population (Administration for Community Living, 2018e). A direct result of the Older American Act led to states creating their own departments on aging, such as the Illinois Department on Aging, which was created to serve as an advocate for the elderly in the state of Illinois (Illinois Department on Aging, 2018a). The Illinois Act on the Aging was developed to assist in the creation of programs to meet the needs of the elderly in the state of Illinois (Illinois Act on the Aging, 20 I.L.C.S.§ 105).The Adult Protective Services Act was established in the state of Illinois as an organization that has the primary mission of developing rules and regulations to be implemented by provider agencies (Adult Protective Services Act, 320 I.L.C.S. § 20). Expansion of elderly care from facility-based care to home care was made possible from the creation of the Older Adult Services Act (Older Adult Services Act, 320 I.L.C.S. § 42). The Adult Protective Services is coordinated and controlled through 13 planning and service areas throughout the state of Illinois (Illinois Department on Aging, 2018b). These areas work along with the 45 provider agencies as it is these 45 provider agencies that provide direct programs and service to the elderly in the state of Illinois (Illinois Department on Aging, 2018c). Understanding these essential statues and acts will be crucial in understanding the objectives of this dissertation and its primary objectives.

The topic of the study as mentioned earlier is elder abuse with a concentration on the policies that guide the response and are utilized by the 13 planning and service areas concerning the cases of elder abuse in the state of Illinois. According to Teresi et al. (2016) policies and strategies to address the issue of elderly abuse are in their early stages

and have much to improve upon for the problem to be adequately addressed. According to Thobaben (2012), there is no consensus on the number of reported cases of elder abuse as it is one of most under-reported social problems in today's society. The literature indicated that there is a problem in the elderly population in that it is underserved regarding resources or a clear solution to the issue of elderly abuse. According to Turner (2016), regardless of where an individual or citizen lives, he or she is deserving of being able to live a life where there are resources available in cases such as abuse or other social problems that may be encountered. However, Manthorpe (2015) asserted that due to the elderly being susceptible to illnesses, such as dementia and other physical problems due to the age, they are vulnerable to being victims of abuse.

Manthorpe's statement illuminated a critical issue that has not been studied: there may be a lack of a clear direction in which service providers or local governments are responding to the issue of elderly abuse. Furthermore, older adults tend to suffer more from illnesses that reduce their ability to care for themselves adequately, which can lead to them being abused (McClintock, Dale, Laumann, & Waite, 2016). Mariam, McClure, Robinson, and Yang (2014) argued that there must be a proactive program regarding the service providers and the role they play when providing services to the elderly, in that they can better anticipate and respond to suspected and confirmed cases of abuse. Elder abuse is not a mainstream social issue that is found everywhere in the world, but it is a social issue that is relatively new in terms of being examined in a serious manner (Momtaz, Hamid, & Ibrahim, 2013). This idea reinforced and shed light on the gap that needed to be addressed regarding the issue of elderly abuse. This study was conducted

not only to fill the gap but also to increase the knowledge base and generate positive

social change that is expected to lead to the elderly having a better life.

Problem Statement

Elderly abuse is an issue that often gets lost in the mix of all the social problems

that currently plague our society. Topics such as racism, poverty and many others are

usually at the forefront of the news. However, this should not diminish the importance of

elderly abuse: It is a severe problem. Sooryanarayana, Choo, and Hairi (2013) described

the issue of elder abuse as one that does not depend on whether the nation is a developed

or undeveloped country. Elderly abuse is a problem that is on the rise. Dong (2015b)

asserted that there is undeniable evidence that the issue of elderly abuse is an increasing

problem worldwide that requires attention. However, the focus of this dissertation was

not concerned with the causes of elderly abuse but with the current policies and response

to the issue of elderly abuse. Previous studies have argued that service providers must

play a significant role in addressing the issue of elderly abuse (Adams, Bagshaw, Wendt,

& Zannettino, 2014). The 13 planning and service areas along with the 45 provider

agencies are often the organizations that are there to assist the elderly, thus many

individuals of the elderly population depend on these institutions for help.

Even though the Adult Protective Services Program was established to help

address issues such as abuse, it has yet to be seen if this organization is efficient in its

response (Ahmed et al., 2016). What is self-evident is that there is no clear response or

policy that offers a reliable solution to the issue or if the execution of the response is

adequate at the 13 planning service areas or 45 provider agencies level or both. Which is

what needs to be explored and determined. Policies created by the state have an enormous effect as to how organizations respond to the problems of elderly care as well as issues such as elderly abuse (Browne & Braun, 2001). This dissertation helped to increase the knowledge base regarding elderly abuse by filling the gap as to why current policies and service providers lack a clear strategy and vision as to how to respond to elder abuse in an efficient manner.

Purpose

The primary intent of this research was to shed light on the effectiveness of the current policies and the role that these policies played concerning the 13 planning and service areas regarding the problem of elderly abuse. Which was based on the findings this study generated and thus determined the role played by the current policies. This study used the qualitative approach of interviews and secondary data to explore the current policies that guided the 13 planning and service areas and which are utilized in responding to elderly abuse and determined if the response was effective. This research increased the knowledge regarding how service providers reacted to incidents of elderly abuse based on the current policies and what policies were utilized to respond to cases of elderly abuse. By narrowing the focus of the study on how the 13 planning and service areas reacted and investigated elderly abuse, and by exploration of the weakness of the current response protocols, I hoped to improve the services received by the elderly.

Research Questions

1. RQ1: How do the 13 planning and service areas directors in the state of Illinois evaluate the current policies related to elderly abuse?

2. RQ2: What impact does funding have on the measurable outcomes of the 13 planning and service areas and the 45 provider agencies?

Theoretical Framework

A study is as strong as the theoretical framework that supports; a theoretical framework is the cornerstone of a study and allows the study to be conducted in a reliable and trustworthy manner. According to Ravitch and Carl (2015) a theoretical framework gives the study a stable foundation. Gen and Wright (2013) argued that implementing a theoretical framework in a study that plans to analyze a study is crucial in that a framework gives the study a much needed grounding and structure.

This study utilized the theoretical framework known as the narrative policy framework, which helped to provide the framework needed to construct a strong and reliable study. This section gave the reader a brief overview of the narrative policy framework and its reason for being implemented in this particular study. In the following Chapter 2, I explored the theoretical framework in further detail but in this section of the study, I explain the importance of this framework concerning my research study. The theoretical framework that served as the anchor for my study was the narrative policy framework. According to Sabatier and Weible (2014), the analysis of narratives can be of great use in examining policies and those individuals and groups who are affected by such policies.

Policies are described as a type of method to help formally address social issues with the primary objective of improving the lives of those affected by the targeted social problem (Horejes, 2013). Freer (2012) added that the narrative policy framework is

impactful in presenting various views regarding single or multiple policies affecting a society. Barradell and Peseta (2017) argued that the use of narratives in a health-related field, was one of the best methods of conducting a study. Kuchler and Lovbrand (2015) defined the narrative as a method in which policymakers may be able to determine if a particular policy is reaching its intended target and if there is compliance with the policy, thus conveying the overall effectiveness of the policy. According to Gray and Jones (2016), the narrative policy framework allows the researcher to examine a policy and its narratives in a structured environment that allows for the best results to be gathered. Although there is no origin story regarding this particular theoretical framework, it is a framework that can be utilized when attempting to create a policy change, as I sought to do in this study. According to Bene et al. (2017), the concise proposition of the narrative policy framework is to examine the policies through the view or narratives of those individuals with first-hand experience and knowledge regarding the policy. Birchfield (2013) noted that the utilization of the narrative theoretical framework helps to explain the policy and how it affects society and what can be done to improve it. The narrative policy framework gives meaning to the respondents' narratives in relation to the policy in question (Blair & McCormack, 2016). This statement conveys the primary objective of this framework, which perfectly fits the objective of this study: Any framework must support the research questions as well as give the study a foundation.

Studies have shown that frameworks such as the narrative policy framework, helped to assess the rationality for the policy and where it might fail in terms of being effective in meeting its objectives (Borras & Jordana, 2016). However, Bowell, Geddes,

and Scholten (2011) iterated that for the narrative policy framework to be successful, the narratives utilized must be cognitively plausible, morally compelling, and be related to perceived public interest if the framework is to be successful in creating meaning for the policy. The narrative policy framework is a framework that allows for the cooperation between those who set the policies and those individuals who are affected by the policies in terms of enforcing those policies (Akalu, 2014). According to Albright (2011), policymakers or anyone who decides to evaluate a policy will utilize a theoretical framework that can help them to analyze complex policy processes regarding the policy's effectiveness. This statement convey a focal point as to why the study I conducted needed to have implemented a theoretical framework such as the narrative policy framework, so that the current policies meant to address the issue of elder abuse may be properly analyzed before coming to a conclusion as well as being able to sufficiently answer the research questions. In the implementation of a policy framework, regardless of which is selected, the objective is to create an alignment between the policy and those who are directly affected by the policy (Barbieri, 2015). Ferry and Bachtler (2013) wrote that studies concerning policies have been conducted since the 1960s, which all tended to focus on selecting the policy's theoretical framework that would have the ability to address, through narratives, the concerns of not only policymakers but of the constituents as well. Furthermore, Ertas (2015) described the narrative policy framework as one that helps to shape aggregate opinion concerning a policy through individual narratives regarding the policy in question. However, Dodge (2015) warned that along with the

narrative policy framework or any policy framework the researcher must not neglect other sources of data to help support the narratives collected.

Doge's idea is crucial, not just in the study but in any study whose goal is analyzing a policy, because regardless of the importance of a narrative, it must be supported with other data in order to strengthen the argument. According to Jones and Radaelli (2016) the narratives collected within the narrative policy framework helps to assist in analyzing properties and assertions made by the participants regarding the policy in question as well as verifying whether or not they are supported by other sources of evidence. On the other hand, according to Ciomaga (2013), the narrative policy framework has become a popular framework to utilize when studying a policy because it helps to focus the study regarding the strengths and weaknesses of a policy by comparing the intent of the policy to the actuality of the policy, which is observed from the collected narratives. Chan and Ross (2014) asserted that the narratives collected should be analyzed in a manner that creates awareness for the public but also inspires those who create policies to implement changes to the current policy if they are warranted. Cavieres-Fernandez (2017) argued that the narratives collected from a study that uses the narrative policy framework creates an extensive amount of knowledge that can allow those who create policies to obtain a closer experience regarding the effectiveness of the policies and to be able to use the knowledge gained to create change in the policy. According to, Lybecker, McBeth, Husmann, and Pelikan (2015), narratives collected to analyze policies are constructive in that they offer multiple viewpoints and knowledge that would otherwise not be known, which have the potential to help change or create new policies.

A policy does not have the ability to give the researcher a clear answer concerning the effectiveness of a policy, which is why utilizing a policy framework that contains a narrative component will help in pinpointing what and where the policy is failing (Jones & Song, 2013).

The narrative policy framework is said to have been created as a method to evaluate statements regarding the functionality and effectiveness of a policy (Jones, 2014). This assertion conveyed a clear function of this theoretical framework and also how a researcher may effectively apply this framework in a study. According to Husmann (2015), another factor that influences narratives concerning a study on a policy is the social construct of a population, because a particular type of population construct may feel differently towards a policy while another social construct may share the same opinions or differ based, once again, on the type of social construction of the population from which the narratives are collected. Finally, narratives are deemed valuable in the academic world as these narratives when utilized to study a policy help to give the researcher a glimpse into a particular population and its government based on the reaction of these narratives towards a policy (Jiwani & Krawchenko, 2014). This statement conveys just how practical the theoretical framework of the narrative policy framework is, in that it helped my study better analyze the current policies affecting the elderly population in the state of Illinois by analyzing the narrative regarding the social issue of elderly abuse. Furthermore, the research questions that were posed in this study correlated with the theoretical framework as the narrative was utilized not only to collect data but also to take a glimpse into the elderly population and thus generate a study that

would be comprehensive in its approach regarding this social issue of elderly abuse. Being able to properly understand the current policies concerning elderly abuse was one of the primary objectives in this study, but could not happen unless a theoretical framework, such as the narrative policy framework, was implemented as a method to gaining meaning from the narratives that were gathered and analyzed in this study. The function of any theoretical framework is to help strengthen the study by providing a foundation, but also to assist in being able to address the research questions that are posed, which is what the narrative policy framework helped to achieve in this study.

Nature of the Study

Exploring social issues through data that consist of narratives, which often includes personal experiences, requires a research design that is able to best analyze this type of data and no research design better addresses this situation than the qualitative research design. The qualitative design helps a researcher to better study and examine the manner in which individuals or people view a particular social issue or phenomenon (Ravitch & Carl, 2015). In addition, the qualitative research design is essential in being able to understand problems faced at the personal level by organizations as well as individuals (Jonsen, Fendt, & Point, 2017). Santiago-Delefosse, Bruchez, Gavin, Stephen, and Roux (2015) stated that the quantitative research design has become more useful when reporting on social and medical issues. According to Tracy (2010), the qualitative research design helps to give the reader a closer view of the social problem as well as a stake in the issue by generating awareness of its importance. Consequently a qualitative research designed study can advance critical social problems (Kozleski, 2017).

The primary objective or focus of this research was to better understand the current

policies and responses by which the 13 planning and service areas abide when responding

and investigating to a case of elderly abuse within the state of Illinois as well as the effect

the amount of funding had in the response. The qualitative research design helps to better

explain social issues and phenomenon through its ability to present the findings at a

personal level that is easily relatable to the reader (Koch, Niesz, & McCarthy, 2013). The

social issue of elderly abuse is one of a delicate nature because of the fact that there are

personal narratives, which can only be addressed through a qualitative design. According

to Waite (2014) the qualitative research design is successful in interpreting personal and

social experiences if conducted in an appropriate manner.

   According to Creswell (2012), the qualitative model is best suited for studies that

delve into personal experiences as a qualitative design is able to make sense of these

personal experiences in a productive and constructive manner. Furthermore Ganong and

Coleman (2014) described the utilization of the qualitative design as one that produces

rich data that cannot be obtained through quantitative approaches. As consistent with

most qualitative research design studies, the data that were created consisted of personal

narratives gathered from interviews, which, for all intents and purposes regarding this

study, were narratives faced by the 13 planning and service areas as they addressed the

social issue of elderly abuse in the state of Illinois as well as the funding issues. Drisko

(2015) iterated that through methods such as interviews one can gain essential data when

performing a study in a naturalistic setting. The narratives I collected give the reader a

more precise picture about elderly, which were only able to be explored and studied in a

qualitative research design. The analysis afforded by the qualitative research design

helped to better illustrate the essential themes encountered by the 13 planning and service

areas as they respond to and investigate cases of elderly abuse.

Definitions

In any study, there are working definitions, which need to be defined so that the

reader may be aware of what message the researcher was trying to convey or what

meaning the researcher was trying to illustrate when using an essential term in the study.

The researcher will emphasize specific crucial terms through the study, and it is these

terms that must be defined so that there is no lost meaning of what the researcher was

trying to get across to the reader and other fellow scholars. The following terms were

essential to my study regarding elder abuse:

Older American Act: is defined as an act created to allow those considered part of the

elderly population an opportunity to enjoy the same benefits and pleasure as any citizen

in the United States (Illinois Department on Aging, 2017b).

Abuse: is defined as mistreatment that threatens another person's freedoms whether they

be civil freedoms or fundamental human rights (Bedford Borough Council, 2017).

Elder abuse: is defined as a failure or the direct intention of an individual(s) regardless of

relation to the elderly individual, to cause harm whether it be physical, sexual, emotional,

financial or everyday neglect to an older individual (Center for Disease Control and

Prevention, 2017).

Non-profit: is defined as public organizations that were created in order to provide a

public benefit and are tax exempt, as they do not generate revenue as they are only

available to assist and address a particular social issue and thus provide the social benefit (National Council of Nonprofits, 2017).

This definition of the Older American Act was essential in helping to establish what current policies are in place to address the issue of elder abuse in the state of Illinois. Setting the term of abuse in this manner helped to better deliver the message to the reader of what was meant by the term abuse in the sole context of this research study. This definition of elder abuse was seen throughout the study, which is why it was critical that it be defined in such a manner alongside with the general meaning of abuse. This term non-profit was crucial in that this study addressed non-profit organizations such as the adult service providers, which is why it was vital that this term be defined for the reader so that it is made clear what exactly is a non-profit organization and its role regarding elderly abuse, which is the primary social issue being researched in this study. These terms defined above were critical in being able to deliver a precise message as well as serving as a guide for the reader in being able to know what is meant by specific terms that are interwoven throughout the study.

Assumptions

Assumptions is a set of conditions that I, as the researcher, assumed to be true despite not being able to demonstrate otherwise as part of the overall research experience. In regard to my prospective study, I worked under the assumptions that the participants that I interviewed gave honest and truthful responses. The questions asked to generate those reactions were worded in a clear and precise manner so that there was no confusion. Another assumption was that the data collected was honest without researcher bias and

was current according to today's culture and events. I assumed that the 13 planning

services and 45 provider agencies planned and executed their services to the best of their

abilities under the current circumstances. I assumed that the 13 planning services and 45

provider agencies were educating the elderly population concerning their services. I also

assumed that all laws and policies were being followed and executed in an appropriate

manner concerning the issue of elder abuse. The results of this study can be used to

generate a generalization concerning the elderly population in relation to the social issue

of elderly abuse because of the size of the sample that was used in this study. The final

assumption for this study was that it will lead to social change or inspire future studies

that will create a shift in policy.

Scope and Delimitations

The primary scope of this study was to explore the current policies and execution

of these policies regarding the response to elder abuse in the state of Illinois as well as the

outcomes funding created by the state's allocation of the funds in relation to the amount

of funding received in conjunction to the response and services provided concerning elder

abuse. The participants that were interviewed for this study were the directors of the 13

planning and service areas throughout the state of Illinois so that a general assessment

was created regarding the sentiment concerning the current policies that are in place for

the 13 planning and service areas and how it influences their response. The state of

Illinois has 13 planning and service areas. These 13 agencies work with 45 provider

agencies throughout the state. The reason why the directors of the 13 planning and

service areas were interviewed is that they have first-hand experience in dealing with the

policies that were created to respond to elder abuse and can, therefore, give the best response regarding the effectiveness of these current policies and the effect funding has on the response to elder abuse. This study focused on the 13 planning and service areas along with 45 provider agencies as these are at the time the sole resource for the elderly when facing situations considered abuse.

It was established that the 13 planning and service areas assist the entire state of Illinois. The data collected from these interviews produced the most reliable results concerning the effectiveness of the current policies that are in place to handle elderly abuse. This study may be transferable to other similar studies concerning social issues because this study focused on the entire state, which gave it a large sample size that could be comparable to other states if there were similar circumstances. Grace, Malone, and Murphy (2016) described the concept of transferability as the application of a study to the same case in which the ideas of a previous example may apply to another study. Burchett, Dobrow, Lavis, and Mayhew (2017) described the concept of transferability as applying the ideas of a specific research to a broader or general study regarding a similar issue. Similar studies may use ideas from one another in order to increase knowledge or generate further awareness of an ongoing problem (Breen, 2016). The transferability of the social issue of elderly abuse was one that could be used in studies regarding the general topic of abuse itself. The results and data from my study could be transferable to other issues besides abuse, due to the very nature of the research, which was to help not only increase the knowledge base but also to generate awareness about a problem that is faced in most societies.

Limitations

Limitations are obstacles that are not controlled by the researcher in the context of conducting the study. Christensen (2016) described limitations as potential problems that are faced through the act of performing a study. Mancuso et al. (2015) viewed limitations as particular issues that were not addressed in the current study but may be in potential future research studies. However, Dressel et al. (2017) defined the term of limitation as a weakness in a given method or process. Brutus, Aguinis, and Wassmer (2013) added that it is crucial that limitations be reported or noted in every study so that the reader is aware of what the study offers and where it falls short. According to Rennison and Addington (2014), a researcher may discover the limitations of the study by merely examining the extent or scope of his study so that he may see where and what his research fails to address. Based on these viewpoints on what is a limitation in the context of a study I viewed the following potential concerns as limitations in my qualitative study regarding elderly abuse. One limitation was that the interviews conducted were with the directors of the 13 planning and service areas instead of elderly individuals who are receiving the treatments and participating in the programs. A reason that I could foresee this concern as a limitation is that it does not generate any data from those directly affected by the execution of the current policies regarding elderly abuse. An argument may be made that the elderly individual is better equipped to evaluate the effectiveness of the current polices as they are the ones receiving the treatment and participating in the programs. However, I decided to interview the directors of the 13 planning and service areas instead because of the higher degree of reliability; the elderly individual might not know any

information about the current policies concerning elderly abuse as well as information regarding funding. I addressed the issue of the elderly experience through the use of secondary studies, which covered the elderly experience concerning unreported abuse and quality of the services during the literature review. Another reason for the study is that there have not been many studies conducted on the policies related to elderly abuse. A second limitation was that none of the data collected were obtained from the observation of the 13 planning and service areas themselves as they investigate a case of elderly abuse. The respondents based their responses not only on complaints but according to the type of services they provide in a particular area based on the needs of that area, which may be limited if every elderly individual does not report a complaint in a particular area or district. The data for this study was collected through interviews and secondary data. Observation would allow for data that reflects the direct response of service providers and the elderly individual. However, observation was not used, due to time constraints as well as being able to gain access to such data.

These two primary limitations were ones that were addressed so that the reader is aware and so that they can be used for future research. Overcoming these two limitations was accomplished through the type of data that I was able to collect as well as the analysis of the data in a manner that answered the research questions without leaving any stone unturned, thus giving the reader a well-rounded answer to the issue of elder abuse as well as the current policies that are in place to address this social problem. Another strategy in overcoming these listed limitations was through the recommendation of potential future research studies that may be conducted by other researchers, who might

want to use observation as a method to collect up-close data regarding response to elderly

abuse as well as the interviewing of the elderly individual for a more personal

perspective. By implanting such strategies, I believed I overcame these limitations and

have a study that is equipped with reliable data that has the potential to create a

substantial positive social change.

<div align="center">**Significance**</div>

Whenever a study is conducted, there is always hope that the study will have

significance not only in the academic world but also in the real world, where the benefits

of the study may be shared with those in society. A successful study should be able to

advance the knowledge base as well as lead to potential social change. A possible

contribution of my research, in terms of increasing the knowledge base, was the potential

of gaining more knowledge about how the directors of the 13 planning and service areas

felt about the current policies and funding covering elderly abuse and if they felt that

these current policies went far enough in providing the best help possible to victims of

elder abuse or if they needed to be reformed. Another potential growth in the knowledge

base regarding elderly abuse was that this study sought to present a clear strategy of what

may be done to improve upon the current policies regarding elderly abuse.

As stated in the problem statement, I believed there was a social issue concerning

elderly abuse and that this study filled that knowledge gap, which was a great

significance in that it increased our overall knowledge of the social issue of elderly abuse

and proposed potential resolutions that were based on the findings discovered in this

study. However, the most vital importance that a study may have lies in its ability to

generate positive social change and improve the lives of those affected by the issue. An issue, such as elderly abuse, has the makings to create potential positive social change because everyone knows someone who is part of the elderly population in their community and does not wish for that individual to suffer from abuse. Another interesting note contemplated was the fact that one day everyone will join the elderly community, which is why such a study concerning the current policies regarding elderly abuse was essential. As a researcher I hoped that the research I conducted will lead to positive social change in that it causes more interest in the current policies concerning elderly abuse so that new policies are created that will see that any elderly individual regardless of race or gender will have access to the best care if they feel they are a victim of abuse. If a study has the potential to create positive social change for an individual or group of people, it can be said that the study has significance. What cannot be stressed enough is that I hoped that the study I conducted, will have had positive implications in being able to contribute to the current knowledge base. As well as stimulate potential positive social change in that it leads to more awareness which hopefully creates new policies and that it also leads to further data regarding how directors of the 13 planning and service areas feel concerning the issue of elderly abuse. Every study should seek to increase the knowledge base about the subject matter and to create or generate potential positive social change in the community, change that enhances the life experiences of the individual as well as the target population of the study.

Summary

This chapter was about setting the focus of the study and its foundation to as how the research will flow from the start to the end of the study. This chapter's objective was to set the premise of the study concerning the social issue of elderly abuse and the current policies that are in place to address this issue. The importance of stating the problem or proposition of the study was to give the reader a clear view of what the study entailed so as the information in the study made sense in terms of logic and reason, as well as why such data was made available in the study because of the problem that was being addressed. The problem statement also had the added benefit of giving the study a reason for its existence in that there was a problem that required further investigation, which may have led to solutions to minimize the problem or eradicate the issue altogether. The purpose of the study was established in order to provide a clear intent of the study. The objective was to convey the effectiveness of the current policies concerning the 13 planning and service areas as they address the social issue of elderly abuse in the state of Illinois. Another crucial foundation element that was presented in this chapter was the concept of the theoretical framework and its importance in this qualitative study. As was shown in the chapter, the theoretical framework was the foundation of the study as it helped to guide the study in a manner that adequately answered the research questions posed in the study. The narrative policy framework, which was the theoretical framework selected for this study, was essential to the study because as noted earlier, this framework helped to better analyze the narratives that were gathered from the directors of these adult service providers.

Another aspect of this chapter was the creation of research questions, which were used to narrow the focus of the study and give the researcher a goal to reach through the collected data. As the ultimate objective was to be able to answer the research question. In addition to the research question, another essential topic that was addressed was the nature of the study. The nature of the study described the design of the study and conveyed why this model was critical to the study. Being that the study explored narratives from the directors of these service providers, the only research design that was equipped to best support this type of data was the qualitative research design. This chapter also discussed the issue of defining essential terms that were used throughout the study. Assumptions and the scope of the study were established in this chapter as it was essential to clarify what assumptions were implemented in this study. Assumptions such as that the participants gave honest answers when giving replies were one of the assumptions that was used in this study. Scope and delimitations were what precisely was explored in the study. This study focused on the current policies in place and examined their effectiveness through the interviewing of the 13 planning and service areas directors. A final item that was explored in this chapter was the concept of limitations in a study. Circumstances that cannot be controlled by the researcher, whether they are research design weaknesses, or any other type of vulnerability, are referred to as limitations which may be explored in different future studies. A limitation that I perceived from this study was the notion that no data would be collected from elderly individuals which may have been essential; however, this was justified because elderly

individuals may have had a difficult time remembering full facts or circumstances of their abuse case. Such a limitation may be a potential future research topic.

Finally, the significance of the study was discussed because any study hopes to have an impact on society as well as in the academic world. In regards to my study, the primary significance of the study was that it would create further awareness of this social issue and lead to positive social change that would improve the lives regardless of race or gender for any elderly individual in that she or he knows that there is a practical policy in place that addresses her or his abuse in the most efficient manner, guaranteeing him a better life.

In Chapter 2, the literature review, I discuss essential aspects of the study such as strategies for collecting important literature and the theoretical framework.

Chapter 2: Literature Review

Literature Search Strategies

No matter what type of study is being conducted from a simple research paper to something complex as a dissertation it is crucial to have a literature search strategy. A literature search strategy may be considered a blueprint for how one will gather the data required to create a study. This blueprint allows the researcher to focus energy on gathering the information itself rather than spending time trying to figure out where the data may be discovered, thus optimizing time in an efficient manner. A strategy that I have utilized is filtering my research via Walden's library and its enormous number of journals that were used within the study. Databases included; Taylor and Francis, SAGE Journals, Political Science Complete and so on. Google Scholar was another database that allows the user access to a substantial amount of data covering a large variety of topics. However, locating a trustworthy database(s) from where one can gather critical data was only a part of the equation in terms of findings research worthy information. The second part of the equation in terms of finding scholarly data was the type of terms or key search terms when accessing a database. An example was the entering of the terms *elder abuse, abuse, secondary data, Adult Protective Services, reporting, trustworthiness, ethics, credibility, transferability, and dependability,* and find as many journals related to the topic from the last 5 years. Entering the topic as a key search term helped to retrieve all the general information as well as previous studies that have been conducted so I could begin to formulate the direction in which I wanted to take the study so that it is different

from previous studies as well as adding to the current knowledge base regarding the issue at hand.

For more specific type of data the key search terms must be also specific to the type of information that is needed for the study. An example was the service providers within the state of Illinois or adult services provided to the elderly. These two examples conveyed the need for specific key terms if one expected to gather critical data. Having the correct type of search term decreased the amount of time it takes to find information, which is why it was imperative to be as particular when searching through the database(s). Also another strategy concerning search terms was to utilize specific terms such as the narrative policy framework, when investigating a particular concept. Whether using a specific database or google scholar it was important to formulate the search terms according to the particular type of data that I was trying to collect. In relationship to my approach, the iterative process consisted of taking essential sections of the dissertation and breaking these concepts into smaller bits of information that could be used as search terms, which are later entered into the aforementioned databases to gather the necessary information. For example, the concept of a study having a theoretical framework can be broken down into specific types of theoretical frameworks such as the narrative policy framework, which is then used as a particular word search that can be searched in a database. This iterative process is a strategy that can be utilized through the entire research process because it takes broad ideas and narrows them into simpler terms that can be easily researched in a database to allow for better results and practical data related to the study. This type of strategy mentioned is ideal in most studies; however, not every

search will yield results or enough data to answer all the questions posed in a particular section of the study. In such a case, the best alternative solution is to gather what can be collected and, as the researcher, make the reader aware of such a limitation in the data collected.

During my research I had a very few instances where there was little to no research being conducted on a particular subject matter. A best example of such a scenario would be when trying to collect data regarding the theoretical framework in relevance to the type of study being conducted. I was able to retrieve data on the concept; however, it was not sufficient to the levels I was expecting in order to create a compelling argument as to why such a framework will not only work best in regards to the type of study I am seeking to conduct but is the only type of framework that is required for such a study. As previously mentioned I had planned to gather as much information from the Walden library database as well as speaking to the reference desk at my local library for more information on this particular subject. This type of strategy assisted in the collecting of more data so that it would strengthen the study as well as the case for implementing the narrative policy framework. There may be situations when the researcher will have to go beyond the use of databases in order to gather critical data and as a researcher this must be skill that requires honing if the study is to be successful. As scholarly researchers it is crucial that one goes above the normal outlets for gathering data because it is important to plan and strategies for situations when there is few case studies or data relating the subject being studied. The ultimate goal for any literature search strategy is to be able to gather as much data as possible regarding the particular

areas within the study so that the problem statement and research question are fully
answered.

Theoretical Foundation

A study must be aligned with a framework and or theory so that the information
provided validates the study and gives the reader a better understanding of study
regarding the style it is written. A theoretical framework must be rigorous and have
standards that are seen as aligned with the objectives of the study, which is essential in
any study that attempts to cover a sensitive social issue (Shanahan, Jones, & McBeth,
2011). According to Veselkova (2014), a framework such as the narrative policy
framework offers the researcher a direct approach in analyzing content regarding policy,
which is essential in any study that is attempting to address a social issue. A framework
must provide a foundation that allows the researcher to build his study so that it
transitions from idea to idea without any threats to the study's alignment (Milat & Li,
2017). This dissertation incorporated the narrative policy framework and the policy
feedback theory as the foundation through which this study was built. The narrative
policy framework originated in 2010 as a method in which a researcher could better study
and analyze the efficiency of a policy (Gray & Jones, 2016). Policies affect the lives of
everyone, which is why the use of narratives was a productive method in being able to
evaluate a policy because everyone had a different opinion, which is all crucial in helping
to study a policy as well as creating awareness of any problem in the effectiveness or lack
thereof in a social policy (Skilling, 2012). In addition, Saunders and Sin (2014) iterated
that frameworks which used narratives as a method to gather data are able to address

challenges and tensions that are only experienced by those groups who have shared their

narratives, which is essential in a study that is looking to change policy. Furthermore,

according to Lawton and Rudd (2014), the narrative policy framework helps to determine

the effectiveness of a policy by analyzing the population that is affected by the policy as

well as the policy itself through the process of narratives. Moreover, Robbins (2013) also

iterated that a theoretical framework such as the narrative policy framework, which

utilizes the idea of narratives is a strong method in being able to shine a light on the

complexities of the inner workings regarding a social policy. This framework originated

from the desire to analyze better the policies that are in place which many times affect a

particular target group. Rudick (2016) remarked how theoretical frameworks

encompassing narratives could give management a direct view of factors such as race or

perceived threats that also serve as influences and shape the perceptions one feels

regarding a policy.

      In addition, the narrative policy framework allows the researcher to analyze a

policy from the point of view that the policy and the target population that is affected by

the policy is critical to the analysis of the policy (Jones & Radaelli, 2015). This statement

reflects the primary proposition of this framework in that it can analyze a policy by

taking all of the variables into account and thus offer a more conclusive answer to

whether or not the policy in question is effective or if the policy requires some change.

This proposition offered by the narrative policy framework allows the researcher to

understand better a policy and also the ability to propose a new policy based on the data

received, which will convey the failure or success of the policy being studied.

Furthermore, the narrative policy framework helps to better connect the theoretical aspect

of a study with scientific means when implementing the various variables that are utilized

to analyze a policy (Schlager &Weible, 2013). This statement further strengthens the

proposition that is offered by the implementation of such a theoretical framework in a

study where the objective is to study the effectiveness of a current policy and its effect on

a particular population. As mentioned this type of theoretical framework has been applied

to many different types of cases that have some policy as the common theme. Many

studies related to a policy will use this type of theoretical framework in its research. The

narrative policy framework has been used in cases that have examined policies regarding

the US campaign finance reform. According to Gray and Jones (2016), the narrative

policy framework was implanted in an attempt to better understand financial policy in

relation stakeholders and their view on the utilization of financial resources throughout a

campaign. This study sought to better understand the effect of financial reform policy

during a campaign by using narratives of those affected by the policy such as donors as

well as constituents of a particular political party.

Through the implementation of the narrative policy framework, the study was

able to conclude that indeed there was a need for financial reform regarding the donation

of money towards a political party as many of the narratives suggested a new reform

would help to regulate the funding a political candidate receives (Gray & Jones, 2016).

Furthermore, studies that have argued the need for health reform have utilized the

narrative policy framework as the main theoretical framework of their study. According

to Jones and McBeth (2010), the narrative policy framework was essential in providing

an argument for the need to change the current policies regarding the healthcare system. This study used the narratives from those in need of healthcare as an argument underlining the inadequacy of the current policies that surround the issue of healthcare in the United States. The research also helped to conclude through the utilization of the narrative policy framework the narrative played an enormous role in influencing the opinions of those regarding the issue of healthcare reform in the country (Jones & McBeth, 2010). Other implementations of the narrative policy framework have been towards community issues such as what happened in a case study where a town in Colorado faced off against an oil and gas company. According to Blair and McCormack (2016) the use of the narrative policy framework was to understand the social rift between the public and the oil and gas companies trying to extract oil and gas through a community in Colorado. The embraced the narrative portion of the theoretical framework in order to convey exactly how the community felts towards having oil and gas companies trying to extract oil and gas, as many felt these companies were intruding in their community's way of life. The narrative policy framework is able to give the reader a more clear understanding of how both the oil and gas companies as well as the public felt and reacted to this social issue of having a company trying to extract oil and gas in an area that was seen as intrusive as well as potentially affecting the public's way of life in a negative manner.

Policies regarding any type of social issue can be greatly observed through the narrative policy framework. A case concerning climate policy is a perfect example of how a theoretical framework such as the narrative policy can help to improve or create

such changes as in this case climate policies were adjusted based on the narratives offered

from certain countries from within the European Union (Slominski, 2016). Another

example of the strength of narrative policy framework is in a case that occurred in

Finland, where through the use of the narrative policy framework in the study, it

strengthens the study in that it was able to use narratives as a method in showing

policymakers the limitations and weaknesses of the current policies regarding genetic

technologies. A final study case was conducted on the utilization of the narrative policy

framework in a qualitative study and whether or not this framework could be used in a

study that implements the qualitative approach. The study concluded that the narrative

policy framework is a framework that can work well with the qualitative approach based

on how the researcher interprets the narrative in connection with the policy that is being

investigated (Jones & Radaelli, 2015). This case study reinforced the effectiveness of

using such a theoretical framework for the purposes of evaluating a policy and its direct

and indirect effect on the public or a specific target population. These examples of cases

where the researcher has utilized the narrative policy framework demonstrated the

effectiveness of this theoretical framework to not only be used to evaluate a particular

policy but that also it can be implemented successfully in a qualitative study without

losing any of its efficiency. This framework can use the narratives of not only from the

policymakers but also from those who are affected by the policy so that both voices are

heard, and it can lead to there being a solution to the problem, thus resulting in a potential

change of the policy in question. The next question that should be answered is whether

using the narrative policy framework in my study is logical. One of the objectives in my

study was to understand better how the directors of the 13 planning and service areas felt about the policies that are currently in place that deal with the issue of elderly abuse.

The narrative policy framework will allow for the analyzation of the current policies as well as narratives of those who are affected by these policies (Gray & Jones, 2016). Moreover, Shin and Choi (2014) concluded that a study founded upon the narrative policy framework is one that finds its strength in using narratives to express risk perceptions of a policy and is then able to suggest helpful recommendations to improve the current policies with the goal of drafting a policy that will benefit everyone in a positive manner. Through this framework I was able to better grasp how these directors felt regarding the current policies they have to work with as they respond and investigate to cases of elderly abuse. The theoretical framework selected correlates to the research questions posed in this study in that it helps to create a personal perspective of those who must work alongside the current policies regarding elderly abuse. This framework allowed for a personal perspective by these directors by conveying how these policies fell short of being effective in responding to elderly abuse. The narratives helped to determine that there needs to be a change to the current policies concerning elderly abuse and thus hopefully result in there being new policies that can ensure that the elderly are properly taken care of when reporting a case of abuse. According to Shanahan, McBeth, and Hathaway (2011) the utilization of narratives in a study for the analyzation of a policy has increasingly become a crucial tool for a researcher who is hoping to change a policy. The data that can be gathered by those individuals directly affected by a policy is increasingly valuable in being able to create a change in policy or at least create

awareness that can lead to policy change. Being able to adequately analyze a policy while creating a personal perspective helps to effectively communicate the success or failure of a policy that may require changing so that the affected parties are able to improve their way of life in a positive manner.

Literature Review Related to Key Concepts

A study must have essential concepts that insensate the core values of the study. The three central ideas that were crucial to this study were elderly abuse, the Adult Protective Services and the reporting of the abuse. These three concepts were significant in that it helped to not only give the reader an overview of the current literature regarding these ideas but also give credence to this research.

Elder Abuse

According to Fealy, Donnelly, Bergin, Treacy, and Phelan (2013), the term of elderly abuse did not become part of standard use until the 1970's, which conveys the infancy of the issue of elderly abuse in comparison to other forms of abuse. Moreover, elderly abuse has been a social problem that has only been researched since the late 1970's and has much to be studied as it just has begun to examine elderly abuse in diverse ethnic groups since the middle of the 1980's (Lee & Lightfoot, 2014). Furthermore, Hayslip, Reinberg, and Williams (2015) asserted that elderly abuse has historically been a social issue that has been giving inadequate attention as well as underreported. Elderly abuse is a serious social problem that is worldwide in its severity, which touches millions of lives from those individuals considered as part of the elderly population (Alon & Berg-Warman, 2014). Furthermore, according to Figueredo-Borda

and Yarnoz (2015), elderly abuse is summed as an intentional act of maltreatment towards an elderly individual.

As the baby boomer population reaches the status of being considered an older adult, there will also be an increase in the number of elderly abuse cases (Dong, Simon, & Evans, 2013). According to Day, Leahy-Warren, and McCarthy (2016) there are over one million cases of elderly abuse occurring in the United States in a year. The World Health Organization has labeled elderly maltreatment as a set of repetitive actions that arise in situations where trust is broken through acts that cause emotional and physical harm to the individual. According to Choi, Brownell, and Moldovan (2017), human rights should be respected and not infringed upon regardless of an individual's age. Furthermore, according to Anand, Begley, O'Brien, Taylor, and Killick (2013) elderly abuse remains as one of the social issues that are classified as uncharted territory, which signifies that need for further research. In addition, Brozowski and Hall (2010) asserted that elderly abuse had been given insufficient attention in the last twenty years, which has led to a lack of knowledge when cases of elderly abuse are confronted. According to Fisher, Rudd, Walker, and Stewart (2016), many health physicians such as doctors are unable to accurately recognize and report symptoms of elderly abuse, which conveys the significance of this social problem. Dong (2015b) asserted that despite elderly maltreatment being a new field of research, the act of elderly abuse has been occurring at as much as any other type of abuse such as child abuse or domestic violence. Elder abuse not only happens in society but also in the presence of the victim's family as elderly

abuse cases may occur due to clashes between family member because of values

(Bagshaw, Adams, Zannettino, & Wendt, 2015).

In addition, Band-Winterstein (2015) defined that elder abuse may be manifested as well

as classified as either physical or emotional abuse.

Moreover, according to Beach, Schultz, and Sneed (2016), there are two essential

correlates such as social networks and social support, which affect the well-being of the

elderly individual, which may lead to cases of elderly abuse. Research has also

discovered that elderly maltreatment has been underdeveloped when compared to other

forms of abuse such as child abuse or mental health issues (Biggs & Haapala, 2013).

Furthermore, studies have concluded that mental matters as dementia places elderly

individuals at a higher risk for abuse as many elderly find it difficult to cope with

dementia (Boye & Yan, 2016). Moreover, Carmody, Traynor, and Marchetti (2015)

discovered that health issues such as dementia weaken the response of the elderly

individual, which is essential during cases of elderly abuse. Health issues have been

found to increase the likely hood of elderly abuse, which is why adult protective service

programs must reach out and help elderly individuals with such health issues so that they

do not become victims of abuse (James, Boyle, & Bennett, 2014). According to Mikton,

Maguire, and Shakespeare (2014), there is a lack of a robust and effective strategy in

being able to prevent abuse against individuals who suffer from health issues as they are

more vulnerable to abuse. In contrast, according to Brake (2015), the elderly population

is expected to keep increasing from 13 percent in 2009 to 19 percent in the next twenty-

one years in the United States itself. In Addition, Gatz, Smyer, and DiGilio (2016) the

elderly population is the becoming the fastest growing population in the United States as individuals who have reached the age of sixty-five are now being expected to live an additional 19.3 years, which increases the chances of experiencing elderly abuse. Furthermore, in countries such as Brazil, the elderly population has risen to 60 million people, which presents a problem when confronted with the issue of elderly abuse (Brownell, 2016). Moreover, Choo et al. (2016) asserted that the prevalence of elder abuse can be as low as 1.1 percent and can be as high as 44.6 percent in terms of incidence. In some circumstances, according to Dong (2015a), there has been rate as high as 64 percent of reported cases of elderly abuse, which have been witnessed in countries such as China.

Moreover, social concepts such as social status, living arrangement, and physical status are factors that may escalate or lead to abuse of elderly individuals (Burnes, Pillemer, & Lachs, 2016). In addition, Hamby, Smith, Mitchell, and Turner (2016) argued that many victims of elderly abuse often find themselves living under social conditions such as poverty, prior trauma, low self-esteem, and small educational achievements. Furthermore, according to Burnett, Achenbaum, and Murphy (2014), elderly abuse is not limited by race or gender as it can occur in any community regardless of wealth as well as in any country. Studies have also shown that even in middle-income countries, the elderly population has risen, which conveys that elderly abuse does not only occur in wealthy nations where there is a higher elderly population when compared to less wealthy countries but that elderly abuse can occur anywhere in the world (Cadmus, Owoaje, & Akinyemi, 2015). According to Carmona-Torres et al. (2015),

elderly maltreatment in mid-income countries often goes without any warning thus

creating a problem that is not noticed by the public. Researchers have also uncovered that

elderly abuse has an effect on the mortality of the elderly individual, which is why elderly

abuse must be explored thoroughly (Burnett et al., 2016). However, according to

Buzgova and Ivanova (2011) to examine the issue of elderly abuse, a researcher must

include factors such as family members, other elderly people, and direct care employees

as sources from where elderly maltreatment may be experienced. In addition, current

research has shown that families that experience financial problems often have a more

difficult situation dealing with elderly family members, which at times may lead to cases

of elderly abuse (Chane & Adamek, 2015a). Statistics have shown that elderly

individuals who have been victims of abuse have a 300 percent higher risk of mortality as

well as an increase of other health issues (Cannell, Jetelina, Zavadsky, & Gonzalez,

2016). Furthermore many elderly individuals with preexisting disabilities are often not

adequately examined by medical examiners, which may influence the underreporting of

the abuse being experienced by the elderly individual (Cannell, Manini, Spence-

Almaguer, Maldonado-Molina, & Andresen, 2014).

Another crucial issue in understanding elderly abuse is poverty, which has shown

to be a significant factor in cases of abuse especially in nations or communities that are

plagued with high levels of poverty (Chane & Adamek, 2015b). Moreover, according to

Chang, Simon, and Dong (2016), cultural differences may be a factor in identifying cases

of abuse as the definition of abuse may be different in some cultures. Also, according to

Chokkanathan (2015) in some cultures, the very issue of elderly abuse is concealed as it

is seen as a negative stigma in some cultures such as the Indian culture as well as many others. Furthermore, cultural beliefs play a significant role in the perception as well as in the rate in which the elderly are treated (Dong, Chen, Fulmer, & Simon, 2014). An underlying problem in being able to accurately identify elder abuse rest in the fact that there is also not enough data on the perpetrators of elderly abuse (Choi & Mayer, 2000). Another issue surrounding elder abuse according to Day, Mulcahy, and Leahy-Warren (2016) is the idea of self-neglect which has been found to be a contributing factor in cases of elderly abuse. Self-neglect has been discovered to lead to higher rates of morbidity and early mortality as it is a form of abuse (Dong, 2016). Furthermore, DeDonder et al. (2016) explained that it is also essential to classify the type of abuse as there are different types of abuse such as abuse that frequently occurs while there being situations where only one kind of abuse happens. According to Dong (2013) one of ten elderly individuals will experience abuse; however, this does not account for the cases of abuse that are not reported. In addition, elder abuse is estimated to have only a small percentage of cases reported, which increases the difficulty of adequately being able to study elderly maltreatment (Dong, Chen, Chang, & Simon, 2013). Studies have shown inconsistencies to be in not only the reporting of elderly abuse but also in the social factors and demographics that contribute to elderly maltreatment (Dong &Wang, 2016).

Another factor that cannot be forgotten is the idea of dependency, which is found to be a factor in elderly abuse as in Asian cultures where there it is culturally acceptable for elderly individuals to be depended on family, thus increasing the risk for there to be abuse (Dong, Chen, & Simon, 2016). As the level of Physical independence decreases, it

increases the dependability of the elderly individual, which also increase the risk for
cases of elderly abuse as there is a strong correlation between elderly maltreatment and
physical independence (Dong, Simon, & Evans, 2014). Furthermore, studies have shown
that an elderly individual with chronic disability has a high risk of falling victim to
elderly abuse in comparison to relatively healthy elderly individuals (Ejaz, Rose, &
Anetzberger, 2017). As elderly populations increase so do the chronic illnesses that
plague individuals of such an age, which in turn also increases the chances for more cases
of abuse to occur as many of these elderly individuals are becoming depended for normal
life activities (Fraga et al., 2014). Ageing increase the chances of chronic illnesses which
also includes elderly abuse, which is some of the many issues facing the elderly
population (Goswami & Sahai, 2016). Results of many studies have shown that the
elderly population are at a higher risk in terms of illnesses but also loss of physical
strength, which is needed for everyday living, thus creating a relationship of dependency
for the elderly individual, which may entitle confronting abuse (Halvorsen, Almklov, &
Gjosund, 2017). An issue which is faced by victims of elderly abuse is the loss of dignity,
which often is something that is overlooked as many elderly individuals must not only
struggle with morbidity and potential maltreatment the loss of dignity is something that
an elderly individual wishes to retain as they live out their lives (Hall, Dodd, &
Higginson, 2014).

Elderly abuse may sometimes occur from loss of dignity but as well as mental
issues such as depression, which causes the individual to not care himself in an adequate
manner, which is a problem that is faced by the elderly population (Hansen, Flores,

Coverdale, & Burnett, 2015). Elderly abuse is a permeating problem that does not seem

to have an end and often leaves the elderly individual with a traumatic and emotional

state of mind (Horning, Wilkins, Dhanani, & Henriques, 2013). What differentiates

elderly abuse is that the perpetrators are not able to be grouped into one type of group,

meaning being readily identifiable as being bad guys because research has shown that

perpetrators of elderly abuse are different and have various reasons for committing act of

abuse towards an elderly individual (Jackson, 2016). According to Frazao, Correia,

Norton, and Magalhaes (2015), the elderly population is increasing but has yet

encountered adequate understanding about the determinants and factors related to elderly

abuse. As the population rises so does the rate of elderly abuse, which is why it is

necessary for improvement in the current state regarding response to elderly maltreatment

(Fulmer, Rodgers, & Pelger, 2014).

Adult Protective Services

According to Jackson (2017), the Adult Protective Services are an organization

that can be found in every state within the United States with the primary goal of

responding to cases of elderly abuse. The Adult Protective Service was created as an

organization with its primary mission to address the issue of elderly abuse (Ernst et al.,

2014). Many health-related protection programs possess the maintain core values that

focus on the community, cultural strategies, and language strategies (Jongen, McCalman,

& Bainbridge, 2017). Many of these Adult Protective Services utilize the approach of

multidisciplinary teams, which is a strategy intended on providing the best care for

elderly victims of abuse as it contains groups from different disciplines to tackle the issue

of elder abuse (Daly& Jogerst, 2013). However, a negative stigma associated with the

Adult Protective Services is that the organization fails to follow up on previously

responded cases of elderly abuse, which often translates into a continuation of the abuse

(Jackson & Hafemeister, 2013). In addition, some of the programs have shown failure

regarding proper response such as providing quick care response (Cooper, Dow, Hay,

Livingston, & Livingston, 2013). Furthermore, the Adult Protective Services have been

seen as a tool to threaten perpetrators rather than being the solution, which lessens the

effect of the Adult Protective Services in being able to efficiently handle the issue of

elderly abuse (Jackson & Hafemeister, 2014). Moreover, Jackson and Hafemeister (2015)

the Adult Protective Services is the primary liaison for the elderly individual during the

investigation of the abuse as well as giving the elderly individual access to resources

meant to help alleviate the abuse. A problem facing the Adult Protective Services is the

issues that the organization does not focus any of its resources in dealing with the

perpetrators as many of the activities performed by the Adult Protective Services are

related to the elderly victim of abuse (Jackson & Hafemeister, 2016). In addition, in some

states, the Adult Protective Services has defined a vulnerable adult as an individual who

is of eighteen years or older but does not explicitly name elderly individuals as victims of

abuse in its current definition (Jirik & Sanders, 2014). The Adult Protective Services in

countries such as Scotland also face similar problems with the manner in how they define

abuse as well as being to connect abuse with adult protection, which tends to have

adverse consequences (Johnson, 2011). According to Jung (2016) many health care

systems around the world struggle to allocate resources concerning social issues such as

abuse due to the burden placed on politicians to create the change in the healthcare system.

Furthermore, in these healthcare facilities, the type of workload can become overbearing for many of the staff, who are trying to care for older adults and deliver the best possible service (Johansen, 2014). Another issue facing Adult Protective Services is that in some of the programs that are used to protect the elderly victims of abuse there are perpetrators of abuse, which continue the cycle of abuse for the elderly individual (Kamavarapu, Ferriter, Morton, & Vollm, 2017). Furthermore, according to Kaplan and Pillemer (2015), many of the employees hired by the Adult Protective Services possess a bachelor's degree solely as an educational background and are tasked with handling over one hundred cases concerning elderly abuse. However, in many countries, the authorities in charge of operating these Adult Protective Services neglect many of the crucial activities required to properly handle cases of elderly abuse (Khalili, Taghadosi, Gilasi, & Sadrollahi, 2016). Another issue that has been discovered while examining health care programs is the accessibility to these programs by vulnerable groups, which include elderly individuals (Khanassov et al., 2016). Furthermore, according to King, Lulle, Sampaio, and Vullnetari (2016), elderly migrants face challenges of having programs centered on their needs by Adult Protective Services type programs. In addition, elderly males are often not included in strategies by Adult Protective Services, which may be contributed to a lack of research and knowledge by these adult protective service programs (Kosberg, 2014). Funding is another critical issue that requires attention due that there are many elderly individuals, who are poor and may not be able to afford such

treatments despite assistance from programs such as Medicaid (Kwak, Kramer, Lang, & Ledger, 2012).

Another aspect that should be studied is the idea of self-rated health objectives from the individual, which may influence the manner in which the health program functions in response to these self-ratings (Landrine, Corral, Hall, Bess, & Efird, 2016). Overcrowding is a problem observed at many of these Adult Protective Service programs, which conveys a significant challenge facing these Adult Protective Services that need and requires an immediate solution if the elderly are to receive adequate assistance (Legramante et al., 2016). According to Manthorpe (2015), care giving programs must become more alert to the risk of abuse by staff especially concerning elderly individuals, who suffer from severe chronic illnesses such as dementia, where there is a need for adequate complaint system. Caregivers from these Adult Protective Service programs must be proactive in being able to detect signs of abuse such as financial abuse towards elderly individuals with dementia due to the findings, which show that elderly individuals that have dementia are at a higher risk for elderly abuse (Manthorpe, Samsi, & Rapaport, 2012). In addition, according to Mariam, McClure, Robinson, and Yang (2014) the need for diversification in the types of services offered from these programs is imperative as it will ensure that each elderly individual will receive the best help and assistance, which is customized to meet their individual needs. However, Maroof, Ahmad, Khalique, and Ansari (2016) asserted that adult protective service should work together with elder welfare programs so that elderly individuals especially those with low social status may receive the best help when they report their

abuse or illness. According to Martz and Morse (2016) improvement in the process concerning the manner in which Adult Protective Services work with families is crucial in that in many cases, families require assistance when dealing with elderly individuals close to death as it should be a goal of these programs to ease the transition for these families. Studies also suggest that studying both the elderly individual and the caregiver is crucial in determining proper detection and preventions instruments in order to better care for older adults suffering from abuse (Lin & Giles, 2013). Being able to be proactive is necessary for better service to the elderly individual as it may allow for being able to perceive potential abuse as well as improve program practices when responding to cases of abuse (Nakrem, Vinsnes, & Seim, 2011).

Further studies have suggested that Adult Protective Services shift their practices from solely focusing on physical illness but that a focus on overall health which includes mental health is needed so that programs may better respond to elderly individuals who may be suffering from abuse (McClintock, Dale, Laumann, & Waite, 2016). Health professionals must keep learning and researching issues related to abuse if the processes currently utilized are to be improved and give that elderly individual the best help possible (McGarry & Ali, 2016). Moreover, Mears, Reisig, Scaggs, and Holtfreter (2014) uncovered that many elderly individuals are at risk to consumer fraud, which is a type of abuse that Adult Protective Services should assist in helping the elderly to avoid through its programs an should incorporate in its current processes for assisting the elderly. According to Melchiorre, Penhale, and Lamura (2014), there is a need for each county such as Italy to develop Adult Protective Service type programs to have programs that are

primarily focused on issues such as elderly abuse as well as change their process to incorporate these types of programs. Being that elderly abuse is a worldwide problem it is imperative for health policies to develop better programs and means for improving these current programs for dealing with issues such as elderly abuse (Melkas, 2013). Processes should be changed in that programs being offered to the elderly individual will address the issue of accessibility in that there are times when the elderly are not able to afford these programs due to their economic status (Molyneux, 2016). Processes that merge detecting elderly abuse while checking for physical illnesses could improve the manner in which health care programs treat the elderly population (Nisha, Manjaly, Kiran, Matthew, & Kasturi, 2015).

Alternatively, adult protective service programs must ensure that caregivers at these programs are adequately trained so that the processes are executed in the best manner possible (Momtaz, Hamid, & Ibrahim, 2013). Furthermore, the idea of ensuring health professionals are adequately trained to handle elderly abuse cases is what is required if the healthcare system is to be successful in treating problems face by the community (Monteverde, 2014). According to studies many of the guidelines which are implemented by the Adult Protective Services fall short in helping these program workers to better diagnose potential elderly abuse (Mosqueda et al., 2015). Moreover, Nakanishi, Nakashima, Sakata, Tsuchiya, and Takizawa (2013) discovered that the national government should along with health care programs ensure not only proper financial funding but also sufficient staffing. Allowing the caseworker to have more authority in recommending intervention activities in order to protect elderly victims of abuse is

crucial in the fight against elderly abuse (O'Donnell, Treacy, Fealy, Lyons, & Lafferty, 2014). Further data suggest that Adult Protective Services should adjust protocols to include a comprehensive assessment tool when evaluating elderly victims of abuse so as to better serve their needs (Burnett et al., 2014). Furthermore, data reports suggest that standardized screening methods are needed to diagnose elderly abuse efficiently (Cohen, 2013). Also, the gathering of opinions from the elderly themselves may be of great benefit in that it can allow program managers to realize what services could be better developed or created in order to address elderly abuse (Gagnon, DePrince, Srinivas, & Hasche, 2015). Developing strong indicators based on reliable research is required for creating programs suitable for addressing elderly abuse (Lang et al., 2014). In addition, building measurement tools to evaluate the success of these adult protective service programs are needed if any improvement is to be made in the battle against elderly abuse (Iris, Conrad, & Ridings, 2014).

Reporting of the Abuse

According to Ozmete and Megahead (2016), the reporting of elderly abuse is not as easy as perceived due to the very nature that many elderly individuals are either unaware or hide the truth of being abused. Furthermore, in countries such as Ireland, the primary response has been to create policies to ensure proper reporting of elderly abuse (Phelan, 2014). In addition, reporting of cases of elderly abuse tended to occur slightly higher in more developed nations, but there is still plenty of work to do concerning the reporting of elderly abuse in society (Sooryanarayana, Choo, & Hairi, 2013). Cultural differences and their perception of elderly abuse influences the reporting rate of abuse

(Lee, Kaplan, & Perez-Stable, 2014). Reporting strategies have begun with simple helplines for victims of elder abuse which is useful to a certain degree (Pillemer, Burnes, Riffin, & Lachs, 2016). According to Strasser and Fulmer (2007), there is an enormous amount of pressure placed on medical professionals to report suspected cases of abuse, which is why it is imperative for proper training in the different types of abuse. Surveys have found that women tended to report their abuse more often in comparison to their male counterparts (Policastro & Finn, 2017). In addition, Policastro and Payne (2013) uncovered that reporting of elderly abuse is complicated due to the fact that many of the caseworkers are not sufficiently knowledgeable regarding the issue of elderly abuse, which is crucial in being able to address the concerns and complaints of victims of elderly abuse. Moreover, Reingle-Gonzalez, Cannell, Jetelina, and Radpour (2016) asserted that lack of knowledge regarding the issue of elderly abuse had limited the ability for emergency medical technicians to successfully report cases of elderly abuse to the Adult Protective Services. Alternatively, Rowe, Fulmer, and Fried (2016) concluded that a lack of workforce contributes to the lack of reporting concerning the issue of elderly abuse. Factors such as education and social status have been found to be influencing factors in determining the rate at which elderly individuals will report their abuse (Ruelas-Gonzales et al., 2016). According to Samsi, Manthorpe, and Chandaria (2014) knowing early signs of elderly abuse such as financial abuse and other types of abuse are essential in the being able to report elderly abuse to the proper authorities effectively.

Furthermore, Scheiderer (2012) concluded that adult protective service programs must look being physical abuse and be alert for psychological abuse so as to report elderly abuse better and recommend the best plan possible to combat the abuse. In addition, Sirey et al. (2015) proclaimed that during most elderly abuse cases the victims are screened for just physical trauma but lack screening of mental trauma, which could better serve these elderly victims of abuse. Despite the strategy of mandatory reporting which was implemented by the Adult Protective Services, it is not as successful as hoped due to reasons such as lack of staffing as well as a standard mechanism for creating and submitting reports related to elderly abuse (Sengstock & Marshall, 2013). In addition, mandatory reporting fails in that is does not differentiate between the different types of abuse which may have an adverse effect on that elderly abuse victims may be lumped with domestic violence victims and as a result not offered the personalized help required by an elderly individual who has reported abuse (Cramer & Brady, 2013). However, mandatory reporting has been found to be insufficient in addressing elderly abuse in the adequate manner in that it does not involve enough cross-agency collaborations (DeLiema, Navarro, Enguidanos, & Wilber, 2015). Moreover, Shelley, Castro, and Cron (2015) asserted that not only do program staff must be appropriately trained, but the numerous volunteers as well must be trained so that they can adequately recognize symptoms of abuse and thus report such suspected cases. In conjunction, nurses must be made of laws and regulation regarding elderly abuse so that they are prepared to report cases of elderly abuse as studies have shown that only a few cases are being adequately reported (Thobaben, 2012). Alternatively, the reporting rate by elderly individuals is

related to the social and economic status of the person as research has found that elderly

adults who are literate and as well in good health were able to not only report their abuse

but also lower their risk for abuse (Tareque, Ahmed, Tiedt, & Hoque, 2014).

Creating programs that target those individuals or groups living in poverty is

imperative as it helps those living in such conditions to have the opportunity to report

their abuse (Tareque, Islam, Koshio, & Kawahara, 2015). However, studies have also

shown that health professionals must learn not only to respect the victim but also not

behave in a manner that is perceived as coercion when recommended help and reporting

of the case of abuse (Taylor, Killick, O'Brien, Begley, & Carter-Anand, 2014). Being

able to change public perception concerning behaviors such as delay of care towards the

elderly is not normative must be created if the reporting system is to be improved in a

manner that gives the best assistance to the elderly individual in need of help (Teresi et

al., 2016). Furthermore, according to Tilse and Wilson (2013) program managers must be

familiar with the laws and regulations if they are to accurately report and handle cases of

elderly abuse as well as changing public perception regarding the issue. Understanding

the individual perspective of the older adult helps in developing strategies that increase

better programs and execution but also in the reporting of the abuse (Tuohy, Stephens, &

Johnston, 2014). Moreover, Wendt, Bagshaw, Zannettino, and Adams (2015) discussed

that the reporting system must take in to account the apprehension of many elderly

individuals when it comes to talking about their abuse, and that program staff must learn

how to detect signs of abuse better and discuss it in a productive manner with the elderly

person before reporting. Furthermore, studies have conveyed that reporting of abuse leads

to a better living situation for the elderly individual, which is why it is prerogative that health professional learns how to detect symptoms and signs of both mental and physical abuse (Wong & Waite, 2016).

Studies have shown that in many cases the elderly individual is very reluctant to report their abuse due to the relationship to the perpetrator of the abuse, which is why it is essential that health professionals be adequately trained concerning the issue of abuse so that they may report the case of suspected abuse (Yan, 2015). In addition to understanding sign and symptoms of abuse, it is also imperative that learning cultural differences is completed as it may help to treat the case of abuse better and ensure that incident is reported (Yan, Chan, & Tiwari, 2015). According to Ziminski-Pickering and Rempusheski (2014) not only do medical professional require education concerning all areas concerning the issue of elderly abuse but the also the elderly individual needs to be educated on the concept of abuse so as to encourage him better to report his abuse in the future. In addition, Gutman and Yon (2014) asserted that first responders must also be trained to recognize symptoms of abuse when treating elderly individuals, so that they may also report suspected abuse to the Adult Protective Services.

Research has also uncovered that in some cases when reporting of abuse has been filed the care has not been performed immediately, which is a contributing factor in discouraging the reporting of abuse by those individuals is living in rural settings (Ylli, 2010). According to Aamodt, Terracina, and Schillerstrom (2015) when Adult Protective Services respond to reports one of the problems is that not enough attention is placed on the living conditions of the elderly individual. However, some shortcomings have been

found in the execution of the reporting of the elderly abuse incident in that program staff face difficult challenges in responding to the reports because of the lack of management support and stronger policies (Cairns & Vreugdenhil, 2013). Reporting of elderly abuse cases must also be aware of presumptions and therefore should be careful not to judge victims based on perceptions when reporting elderly abuse incidents (Cooley, 2015). According to Eisikovits, Koren, and Band-Winterstein (2013) healthcare professionals should not allow their previous experiences and attitudes concerning elderly abuse affect the manner in which they report elderly abuse incidents.

Furthermore, healthcare physicians must understand the severity and the complexity of elderly abuse so that they can diagnose suspected cases of abuse but also report it to adult protective service professionals (Friedman, Avila, Shah, Tanouye, & Joseph, 2014). In contrast, studies have suggested that more stringent penalties are required against medical professionals who fail to report cases of elderly abuse (Payne, 2008). Alternatively, some studies have suggested there be better aftercare programs to ensure that the individual can avoid further abuse and not have to navigate potential new maltreatment alone (Gilbert, Stanley, Penhale, & Gilhooly, 2013). Furthermore, implementation of scales such as the Lichtenberg Financial Decision Rating Scale can help to develop better diagnose different types of abuse such as financial abuse and therefore support in reporting such detected abuse in elderly individuals (Lichtenberg, Stoltman, Ficker, Iris, & Mast, 2015). According to Naughton, Drennan, Lyons, and Lafferty (2013) implementation of public information campaigns concerning elderly abuse would be beneficial in informing the elderly of what is elderly abuse so that they

may report their abuse. Moreover, studies have reported that for every reported case of elderly abuse there are five cases of elderly abuse that goes unreported, which is why it is important to spread information regarding elderly abuse so that it may be diagnosed and reported (Palmer, Brodell, & Mostow, 2013). The most significant shortcoming regarding the reporting of elderly abuse is that there is a lack of knowledgebase concerning what strategies work and what must be changed, so prevention and intervention strategies function as hoped (Pillemer, Connolly, Breckman, Spreng, & Lachs, 2015).

Other Key Variables

Other key variables included selecting a theoretical framework is part of the research process, which leaves the other part to reflect upon the many essential concepts that are associated with creating a worthy scholarly study. Critical ideas such as the methodology of the research or the type of data collection method are all crucial variables that must be chosen wisely by the researcher if he is to adequately communicate his ideas as well as convey the data that he has gathered. As a researcher, these concepts are imperative to grasp because it is through the efficient utilization of these concepts that a successful study may be constructed. The following essential concepts that were analyzed in this section were the qualitative methodology, the interview, and secondary data. These particular concepts were examined due to the fact that these variables will feature heavily in my proposed dissertation. The qualitative method was one that was often used when a study hopes to give a study a personal perspective to the grand issue being researched. Creswell (2012) described the methodology of a qualitative study as one that gives the reader a more personal perspective by allowing to the reader to view how the

individual or group reacts or is affected by a particular social issue. According to

Snilstveit, Oliver, and Vojtkova (2012) many of the questions that are able to be

answered through the methodology of a qualitative study are questions that deal with

what is wrong and what can be done to correct the situation. Furthermore Bridges-

Rhoads and Cleave (2014) iterated that a qualitative methodology helps to gain a

personal perspective but that a researcher must learn to properly utilize the methodology

because of the type of personal data that is collected. In addition Bradbury-Jones, Taylor,

and Herber (2014) described the qualitative method as a methodology that requires the

need for a theoretical framework so that it has a foundation upon which to align the

personal perspective that is acquired from the data.

The qualitative methodology benefits from a theoretical framework in that it helps

to respond to questions that seek to determine why, who or what is being affected and the

context of the situation (Balmer, Rama, Martimianakis, & Stenfors-Hayes, 2016). The

qualitative methodology when used to its full potential can generate a study that captures

the essence and complexity of a social issue or phenomena through its many designs,

which include ethnography, discourse analysis, ethnomethodology and conversation

analysis, phenomenology, archival and historical methods, and structured interviews and

focus groups (Arino, LeBaron, & Milliken, 2016). Also, through the implementation of a

theoretical framework that can interpret the narratives gathered in a qualitative study is

crucial in that a incorporating a framework that can analyze narratives, can provide strong

data for the researcher (Smith, 2013). According to Weible et al. (2011) the ability to

understand policy or any social issue is better served utilizing the qualitative method over

the quantitative method because of the fact that qualitative methodology allows for the understanding of behaviors and sentiments regarding a policy. What is clear is the mere complexity of the qualitative methodology and its application to research. Utilizing the qualitative methodology allows for the study of an issue where the main objective is gaining a personal approach to the issue at hand. According to Anastas (2004) studies related to social worker cases often rely on the qualitative methodology to assist in giving the target population facing a social issue a voice so that awareness is generated. An example of a social issue that implemented the qualitative methodology was a study on the decolonization of Africa. Adams (2014) argued that through the qualitative methodology it was feasible to convey to the readers the culture and lifestyle experience by an inhabitant of Africa and need to free it of colonization. This case study illustrates the core functions of the qualitative methodology in being able to convey its message at the personal level, where the reader is able to comprehend the different issues that are presented by the researcher.

Furthermore, qualitative methodology require that a researcher approach the study with an active learning mentality as the researcher will play a significant role in a qualitative driven study (Drisko, 2015). Studies that have related to the human condition such as abuse or medical research tended to approach the study with great concern regarding potential ethical dilemmas. According to Doyle and Buckley (2017) under the qualitative methodology when studying issues related to a target population concerning a health-related issue, it must be conducted with the highest of ethics, while also trying to collect the best type of data that is beneficial to the overall study. A researcher must also

be prepared to handle sensitive type related studies as the data collected could become an

emotional challenge to some researcher as expected when using the qualitative

methodology (Dickson-Swift, James, Kippen, & Liamputtong, 2009). These emotional

challenges run the risk of becoming weaknesses as a researcher may become overly

attached to the issue, which may lead to bias in the study. Cases that involve sensitive

subjects such as elderly abuse must be handled with great sensitivity as well as being able

to handle the emotional challenges that may arise due to type of data that is being

collected. The literature indicates that researchers conducting studies on social issues

while under the qualitative methodology umbrella encounter numerous difficulties, which

must be handled with care if the study is to be successful (Dickson-Swift, James, Kippen,

& Liamputtong, 2007). Cases that utilize the qualitative methodology while researching

strong social issues such as abuse or discrimination must be undertaken as a political

concern, while striving for justice (Correa, 2013). When the objective is to elicit a change

in a particular policy a researcher will benefit more with a qualitative methodology as

strength of a having a personal perspective regarding the issue is crucial, while at the

same time safeguarding from becoming too emotionally attached, which may become a

weakness in the form of bias in the study.

A case study regarding health care policies benefited from possessing a

qualitative methodology in that it was able with the help from personal narratives to

convey the need for policy reform (Jindal, Singh, & Pandya, 2015). This particular case

study demonstrates how similar studies to the one I am conducted, utilize the qualitative

methodology as a tool to create awareness and inspire the need for a policy change in

circumstances where it is warranted. An example is criminal law reform which used the

qualitative methodology to help inspire policy reform due to narratives from those who

were affected by the present criminal law policies (Hanley, Fileborn, Larcombe, Henry,

& Powell, 2015). This case highlights the strength of the qualitative methodology as one

that can cause there to be a change in policy where those individuals or groups affected

by the previous policy are able to receive better care and resources provided under the

newly inspired policies that have been created as a result from the study. However there

case studies where the issue is deemed controversial due to the amount of arguments

presented from every party involved. A case study involving the issue of social justice in

a neoliberal society, where some felt there should be more government involvement,

while others believe in less government involvement in social issues. Newman and

McNamara (2016) iterated that through the qualitative methodology they were able to get

more practical data and convey that there needs to be more regulation if there is to be

social justice; however, many officials felt that too much regulation could hinder any

progress. This case study utilized the strengths to generate awareness but also left the

issue of what can be accomplished with the results that were gathered in a drive to

continuing the fight for social justice.

What can be derived from these examples is that the qualitative methodology is

one that has its strength in bringing awareness to a social issue by giving the issue a

personal perspective, but it also has a weakness in that the researcher could become bias

if he allows for an emotional attachment approach to the issue instead of the mindset of a

researcher. According to Manning and Kunkel (2014) the qualitative methodology allows

for a researcher to search deeper than a quantitative study in that it is able to gather data that has a more personal approach thus inspiring the need for change in policy. Furthermore, special social issues are easier to study through the qualitative methodology as it brings and analyzes the narrative of the individual or group being studied in the study (Mukhopadhyay & Gupta, 2014). These case studies also demonstrated that it is possible to conduct study related to research questions that pose the question related to policies and their effect on a particular segment of the population.

The next concept that is very essential to a qualitative study such as the study I am proposing is the data collection methods such as the interview and secondary data. Camfield and Palmer-Jones (2013) describes secondary as data collection method that gives the researcher access to data that might not otherwise available and can help to add credibility to the study. Moreover, through the use of smartphone apps, a researcher is able to download archival data as a manner in which to save time so that more crucial information may be collected (Garcia, Welford, & Smith, 2015). On the flip side, the interview is a form of data collection that requires precise transcribing if the data is to be credible and avoid researcher bias (Kiyimba & O'Reilly, 2016). These two forms of data collection under the qualitative approach are essential in mastering as they are some of the methods in which a researcher is able to gather the data needed to answer the research questions posed but also offer a viable solution to the problem that is presented in the study as well. According to Seitz (2016), researchers must learn to accommodate advances in technology such as the ability to conduct interviews over social media outlet

such as Skype, which has helped to improve the manner in which an interview may be performed.

Furthermore, Rosenthal (2016) argued that due to increase in the implementation of the qualitative methodology in social and health-related studies the art of the interview has become a strength in being able to convey the emotions and feelings of those affected by these issues at a personal level, which cannot be done in a quantitative study. These statements reflect the importance of this concept when deciding to conduct a qualitative study as it is imperative to know how to perform an interview because if done correctly it can become an asset to the study as the data acquired is unique and presents a perspective that is otherwise unknown. Robinson (2013) interviews must be precise in types of questions especially in issues that involve social policies. Another component of a great interview is the ability to gather data from interviewees who might be fearful of divulging sensitive information, which may be achieved through the establishment of trust between the researcher and participant (Petkov & Kaoullas, 2016). This idea resonates deeply in that my dissertation will hope to collect data from directors of service providers, who will have sensitive data, thus making it so important to be able to generate an environment of trust and respect. In addition, Phillippi and Lauderdale (2017) advise that field notes be taken during the interview or when collecting data from secondary sources as it can aid the researcher in remembering significant facts as well as the importance of the data. The interviewer must convey expertise and knowledge so that the interviewee feels trust when answering the questions. According to Devotta et al. (2016) no matter what type of interview the main objective is to gather practical data, which is achieved by the creation

of an environment where the participant feels safe and secure due to the interviewer's

knowledge and respect concerning the issue. However, researchers must also be on alert

for potential weaknesses that may occur if the concept of the interview is not conducted

in a proper knowledgeable manner. These weaknesses according to Hoskins and White

(2013) may manifest in lack of objectivity or researcher bias, which may pose a threat to

the data's validity as well as reliability.

Another issue that must considered is need for accurate transcribing of the

interview. Hennink and Weber (2013) argued that the ability to master the concept of

transcribing can help to eliminate confusion as well as any weaknesses by conveying the

true data given by the interviewee thus adding more strength to the study. This statement

signifies that as a researcher one must be precise, direct, knowledgeable, and respectful to

the issue so that when conducting an interview more reliable data can be extracted from

the participant, which will increase the trustworthiness and reliability of the study. On the

contrary secondary data utilizes previous research to extract new meaning to the data.

According to Irwin (2013) iterated that the researcher must avoid ethical dilemmas

through proper interpretation of the data source so as to not raise issues of validity but

instead add new meaning to the data source in order to increase the knowledge base

regarding the issue being studied. In most case studies the use of secondary data is often

complementary to other forms of data collection such as interviews where data can be

compared in order to offer a new point of view regarding a topic (Irwin, Bornat, &

Winterton, 2012). The concept of secondary data is that it allows access to information

that may not otherwise be accessible, which is the primary strength of this form of data

collection. As the data indicates a researcher must not allow his emotions to hinder his interpretation of the source, which could cause bias to manifest in the study. The literature also conveys that an interview must be conducted in an environment where there is respect.

Security and overall knowledge concerning the issue so as to put the participant at ease and more willing to cooperate. Secondary data in addition is as explained earlier through the presented literature is an opportunity to create new knowledge through the interpretation of an already conducted previous study and offering a new perspective in support of a social issue or policy. The concept of the qualitative methodology, the interview, and secondary data are all vital to the success of the dissertation that I as the researcher am proposing. Vital ideas concerning elderly abuse, the adult protective service programs, and the reporting of elderly abuse is essential to the study and its objectives. Researching a social issue such as elderly abuse requires mastery of these three concepts so that the study is able to convey the intended message and hopefully result in a change of policy. Conducting a study is like a puzzle in that it requires the researcher to know how to utilize important concepts so that the reader may view the entire picture and understands what the message the researcher is trying to convey.

<div align="center">**Summary and Conclusion**</div>

This chapter offered insight into the foundation of the study through its literature surrounding important ideas concepts such as current data on elderly abuse, the adult protective service, reporting of the abuse, the theoretical framework, the qualitative methodology, the interview, and secondary data as forms of data collection. The

theoretical framework as shown is the foundation that directs the study and gives it a

foundation. According to Ravitch and Carl (2015) the theoretical framework may be seen

as a stabilizing force on a study that gives it a clear vision as to how the research should

be conducted. This chapter illustrated the significance of the theoretical framework in a

study that is trying to address a social issue that is as sensitive as elderly abuse. The

specific theoretical framework that will be utilized is the narrative policy framework,

which as explained will act as the leading guide for the entire study. The narrative policy

framework is a type of framework that can help to not only convey the voice of the public

but of those who create the policy so as to give the reader the entire story of what the

situation is regarding the issue being addressed.

The literature revealed that the narrative policy framework is a theoretical

framework that is often used when studying sensitive social issues such as abuse or

health-related policies that are in need of reform. The case studies also demonstrated how

researchers will rely on the narrative policy framework to ensure the voice and opinions

of those affected by a policy are heard. The literature also conveyed the strengths and

weaknesses of utilizing the narrative policy framework in a study, which are areas that

must not be overlooked by the researcher when strategizing whether to use the narrative

policy framework as the primary theoretical framework of the study. Weaknesses such as

becoming overly attached to the narratives, while important this information is to the

study, being over attached emotionally may lead to bias hence validity issues. The

strengths of the narrative policy framework are in its ability to represent those affected by

a certain policy and give credence to the researcher as he attempts to present the social

issue in a manner that represents both sides of the argument and why there needs to be a change in the current policy due to various reasons supported by the narratives collected. The ability to articulate the opinions of those individuals or groups being affected by a particular social issue or policy is the brand strength of the narrative policy framework, which is the reason I have chosen this framework as one that will provide the necessary foundation and structure of my study. Generating awareness through personal narratives concerning current policy is one of the objective my study will hope to accomplish, which as mentioned can only occur if the theoretical framework is that of the narrative policy framework. This chapter also evaluated particular variables or concepts that will be crucial to this particular study if it is to be successful. These concepts include the qualitative methodology, the interview and secondary data. The data showed that the qualitative methodology was essential for any studied that wishes to obtain a personal perspective an individual or group has concerning a social issue or sensitive topic. The literature review also revealed the need for further research regarding elderly abuse, the Adult Protective Services as well as the reporting of the abuse.

The main weakness as with the narrative policy framework is the researcher becoming too emotionally attached, which could reduce the validity and credibility of the study if the researcher does not keep his emotions in check when conducting such a study that delves into a high sensitive subject. However, the greatest strength of the qualitative methodology as revealed by the literature is in its ability to give a face to those who are affected by a social issue or policy. Meanwhile concepts such as the interview and secondary data are types of data collection methods that will help to secure the

information needed to for the researcher to validate his study and need for a policy change. The interview is a type of data collection where the interviewer must remember to create an environment of trust as well as be familiar with the issue being studied so as to show respect to the participant. The data showed that a participant will be more willing to participate if he feels that there is mutual respect, trust and that the interviewer is knowledgeable of the issue. The major weakness is that if the interview is not properly transcribed it may lose its value in relation to the rest of the study. The researcher as recommended by the literature must be knowledgeable and organized when conducting an interview so that the message of the interviewee is not only transcribed properly it is implemented in the study where it will have the most positive effect. This type of demeanor must also be used when interpreting secondary data. As established through the literature interpreting secondary data must be done correctly without researcher bias if the study is to maintain its validity. Themes addressed in this chapter helped to address the current policies that are in place regarding the response to cases of elderly abuse. This study hoped to convey how most studies focused on the factors that cause elderly abuse but rarely on the current policies that are in place to respond to the problem. Therefore, the gap that this study filled was to establish a more clearly defined response to the issue of elderly abuse, which will take a reform in the current policy. The following chapter looked into specific concepts with more detail regarding the process of the study and how developed as well as answered the research questions.

Chapter 3: Research Method

Introduction

This chapter explores in detail areas such as the research design, the role of the researcher, methodology, instrumentation, published data instruments, procedures for recruitment, data analysis plan, trustworthiness, and ethical procedures. These major sections were essential to the study as a whole, as these sections conveyed to the reader the strategy that I took in order to conduct this study.

As established earlier, this study was conducted using a qualitative research design to examine the current policies regarding the response to elder abuse in the state of Illinois. This study also sought the opinion and experiences of the 13 planning and service area directors so that I could better comprehend the policies and response strategies concerning elderly abuse. This study also explored the role that the 13 planning and service areas had in dealing with cases of elderly abuse and the importance of funding. This study was able to fill the gap regarding the knowledge base concerning the response to elderly abuse by the examination of the current policies. I hoped to improve the life of the elderly individual through a change in the resources that are received when a case of abuse is reported.

Research Design

The importance of how the research was to be structured was crucial in that it dictated what types of methods were used for collecting data and how it was analyzed. Based on this ideology, it was crucially imperative also to state the research questions

because the research design was created with the intention of answering these questions.

The research questions that were posed for this particular study were as follows:

1.   RQ1: How do the 13 planning and service areas directors in the state of

Illinois evaluate the current policies related to elderly abuse?

2.   RQ2: What impact does funding have on the measurable outcomes of the

13 planning and service areas and the 45 provider agencies?

These research questions helped to establish the common theme or issue that was being

researched in this study, which was phenomenon that the 13 planning and service areas

did not go far enough in responding and investigating elderly cases of abuse in the state

of Illinois. This phenomenon is a social issue that deserves research because of the future

implications on society for future generations. Traditionally, issues that are of the social

variety lean toward the tradition of a qualitative methodology, which involves a mix of

secondary data and interviews as methods for collecting data. According to Meyrick

(2006) the qualitative research design is conducive for studying issues related to public

health and other social issues. Furthermore, Malterud (2001) asserted that traditional

qualitative research designs make use of observation, interviews, and textual data derived

from secondary sources. Based on these statements, this study adhered to the tradition of

the qualitative study, which incorporated interviews and secondary data as part of the

research design. Owen (2014) argued that utilizing the tradition of the interview as a

means of gathering data is beneficial in acquiring first-hand experiences concerning a

policy and its perceived effectiveness or failure. The ability to gather first-hand data was

essential in conducting a study that used a traditional means, such as the interview, for

collecting sensitive information that has the potential to strengthen the argument concerning the effectiveness of a policy. However, despite attacks on whether traditional qualitative inquiry methods are scientific, the results show that there is great benefit especially in studies that relate to social issues concerning public policy (Torrance, 2017).

In addition Masny (2016) argued that a traditional qualitative research design through rhizoanalysis is able to get to the root of what the data is saying and interpret it in a manner that is effective at getting the message to the reader. The benefits of utilizing this type of traditional research design was significant in that only through this type of design can the reader comprehend the critical nature of this issue that was being presented in the study. The rationale for selecting the traditional qualitative research design was in its ability to convey to the reader the need for the study as well as being able to present sensitive data in a manner that was extremely relatable to the audience, which is a feat that cannot be established through a quantitative or mixed methods approach. Broom, Cheshire, and Emmison (2009) described the qualitative research design being as a design that gathers data where it can be described as part researcher and the other part of that of the participant, due to the fact that the data collected must be interpreted by the researcher. This statement strengthened the rationale for why I had decided to use the qualitative research design, along with the traditional methods of collecting data under this design. This research design ensured a successful collection of the data as well as the analysis of the data so that the audience was able to see the importance of this social issue.

Role of the Researcher

As the researcher, I was the director of the study because it is through my actions that the study was conducted. According to Meyrick (2006), a researcher's role in a qualitative study is very active in that he has the task of interpreting and presenting the findings in a scholarly manner. The researcher must, in other words, act as the primary researching tool in that he must collect the data, analyze the data, and report his findings in a scholarly manner with no bias if his research is to be respected by the scholarly community. Creswell (2012) further stressed the value of the researcher in a qualitative study in that the researcher must be willing to the initiative to collect the best data as he can acquire the data in its natural setting and not in a laboratory. Furthermore, Ravitch and Carl (2015) proclaimed that the role of the researcher in a qualitative study is to engage in was is known as criticality in qualitative research, which is the practice of the researcher thinking critically through the connecting of the theoretical framework with the data being collected. When conducting a study that is based in a qualitative methodology, a researcher holds more responsibility for the results as he is the main tool in which these results are collected and analyzed as well as tested for validity and trustworthiness. This brief background regarding the role of the researcher is a foundation upon which it is imperative for a researcher to build upon so that his study is successful in accomplishing what it intended to do as well as inspire future research. According to Jovanovic (2011), an advantage that a qualitative researcher has is that he can collect more personal from social institutions as the researcher is merely an observer who is trying to gain new data regarding a particular social issue. In connection, Jiwani and

Krawchenko (2014) established certain roles that a researcher must inhabit such as being

open to new ideas iterated by the participant(s) so that new ideas may be analyzed and

reported to create an awareness of the issue being studied. In addition, Irvine, Drew, and

Sainsbury (2012) described the role of the researcher as one of being able to empathize

and showing interest towards the participant when observing or collecting data through

methods such as an interview. Further studies according to Doyle and Buckley (2017)

revealed that despite the researcher being in a supervisory type role when collecting data

from participants, the researcher must remember to show respect to the participants while

either observing or interviewing so as to not only protect the participants but also ensure

a safe and comfortable environment for the participants. This concept was of the

uttermost importance when I had ventured out to collect data from my intended

participants, which for the purposes of this study was the directors of the 13 planning and

service areas from within the state of Illinois.

Being able to establish an environment conducive to exchanging of sensitive

information when conducting an interview was critical as I had to balance the supervisory

role of being in charge of the study but also respectful and protective of the wishes

concerning the participants in the study. According to Daniels, Angleman, and Grinnan

(2015), a researcher must proactively set the standards and expectations of the study

when performing an interview or observing the subjects in question. Butler, Copnell, and

Hall (2017) further explained that a researcher must be able to perform risk management

during situations of high stress and be able to lead the interview to help alleviate any

stress the participant(s) may feel when speaking regarding sensitive areas as well as

confidential information. This statement establishes the working standard that a

researcher must follow when interacting with participants in any setting whether it be in a

professional setting or a casual setting. A researcher that utilizes the qualitative

methodology must engage in leadership activities if the study is to be successful because

without proper leadership the study cannot be successful in collecting the required data

(Bryman, 2004). This finding conveyed that as the researcher I had to adopt a

professional relationship with the participants without losing focus on the primary

objective, which was to gather quality data that answered the research questions that have

been posed in the study. Remaining vigilant by watching everything while interacting

with the participants, while also picking up on context clues helps to develop a strong

researcher, who can conduct a strong study when performing activities such as collecting

data (Rich, 2016). Furthermore, Sibbald, MacGregor, MacMillan, and Wathen (2017)

emphasized the importance of being able to read context clues because such clues may

assist in providing an environment where the researcher may collect the best available

information.

However, Torrance (2017) warned that a researcher must not interfere with the

source or participants but rather allow the participant to express their narrative freely. The

role of the researcher regardless of the type of study being conducted, when utilizing a

qualitative methodology must be handled with care and should be planned and executed

with perfection to ensure the not only the best data but also protect the participants while

making them feel comfortable and willing to participate in a productive manner. Current

research regarding the role of the researcher in a qualitative study indicates that the

researcher has an enormous amount of responsibilities and it is up to him to formulate a strategy and execute it to the fullest. In relation to myself as a researcher, my role was one that not only set the standards for the participants but also was warned not to influence the participant so that the data collected was genuine. I also remembered to show interest and respect because when sensitive data is being gathered the researcher must be in control of the study so that standards are maintained. Another area that must not be overlooked was the subject of bias and ethical issues that can hinder a study, which must be addressed and controlled by the researcher. Bias is described as personal attachments to the study matter, which inadvertently may influence the actions and decision making abilities of the researcher (Maxwell, 2012). This description conveys that as a researcher we must not allow our predisposed beliefs regarding a particular topic influence the manner in which we conduct our study from the method in which we collect our data to the manner in which we analyze our results as well as in the manner we report our results. According to Rost and Ehrmann (2015), bias may be described as the following practices in which a researcher may cover certain results or under reports a particular viewpoint so that the study only reflects the desired results of the researcher while neglecting the true results.

Also according to Harrison, Banks, Pollack, O'Boyle, and Short (2016) bias occurs when contradictory results are given minimal attention or are left out of the study because of the perceived harm it may have on the study. Moreover, McShane, Bockenholt, and Hansen (2016) warned that researchers must stay away from behaviors that may potentially lead to bias such as ensuring strict standards so that the results

gathered are trustworthy. Researcher bias a danger that face every one that conducts a study because of the nature in which it may occur due to the fact that bias is usually performed subconsciously, thus given way to the need for strict standards as well as perfect execution of said standards to ensure that the results collected are trustworthy. Meanwhile Rudestam and Newton (2015) recommend that researchers attempt to stay neutral as a strategy in which a researcher may help to prevent bias from adversely affecting his study. This statement helped to convey the message that the role of the researcher is not as simple or can be easily defined because of the various factors that must be taken into accord, and bias is no different as this issue must also be addressed with great seriousness. The issues of bias are also not so simple as there are different types of bias that a researcher may fall prey to if he is not careful in how he crafts his study. According to Findley, Jensen, Malesky, and Pepinsky (2016) a critical type of bias that a researcher should avoid is publication bias, which is a situation where the researcher fails to post all the studies, which include studies that may argues against the study itself. In addition, Gerber, Malhotra, Dowling, and Doherty (2010) discovered that in situation that consisted of publication bias, it was caused due to incentive of the researcher in attempts to publish a study that reflects his stance in a social sensitive topic. Moreover, Esarey and Wu (2016) described publication ad having an adversely effect on the study because failing to report opposing viewpoints may leads to problems that affect the study's validity and trustworthiness.

Furthermore, Banks, Kepes, and Banks (2012) argued that failing to publish all viewpoints regarding a topic, can be detrimental to the overall study because without

presenting every view it is more difficult to influence a potential change in a policy.

DeBruin, Treccani, and Sala (2014) added that a balanced study will include all

viewpoints and be free of any publication bias if the study is to stand on its own and be

respected. This statement serves as a reminder that a researcher must be willing to accept

the results no matter if they are negative because by including all of the results collected

it helps to strengthen the respectability of the study. Another type of bias is evaluation

bias which is defined as bias in which a researcher analyzes the data so that it fits his

purpose concerning the study (East, 2015). In addition, Cook (2014) found that

researchers who did not utilized the concept of a peer review in order to evaluate the

study for potential errors, were more prone to participate in analyzation bias, where the

data is not representative of all the data that was collected. The value of seeking an

alternative viewpoint is a tool that should be implemented by a researcher because of the

fact that in a qualitative study, the researcher is the main researching tool and having a

second viewpoint may be of great benefit. According to Andrews, Logan, and Sinkey

(2015) a negative effect of not having a peer review or other forms of evaluating the

study may lead to situations where the researcher may misinterpret the results so that they

fit his study and thus resulting in bias. The further evidence for needing a second opinion

regarding the analyzation of the data is in the fact that the researcher may partake in self-

indulgence or bias with full knowledge of doing so if the researcher does not plan

accordingly for such situations in advance (Bollich, Rogers, and Vazire, 2015).

Furthermore, according to Gerber and Malhotra (2008) researchers were found to

participate in bias-related behavior earlier in the study when attempting to establish

essential variables important to the study's foundation.

However, there are situations when certain data are left out because of its small

perceived influenced on the study, which is a form of publication bias (Kepes, Banks,

McDaniel, & Whetzel, 2012). Another area within the issue of publication bias related to

the fact that a researcher may be selective in the type of data collected, which will have

an effect on the results concluded by the study (Kromrey & Rendina-Gobioff, 2006). This

idea serves as a critical lesson for every researcher as it is important to be selective of all

data even if the data seems to be a counter viewpoint because if the study being

conducted is to meet the rigorous academic standards it must be representative of every

viewpoint. According to Harrison and Mayo-Wilson (2013) some situations of bias

occurs when the researcher believes that counter viewpoints are irrelevant to the interest

of the reader, which is why some researchers may omit or focus little attention on these

contradictory findings in favor of more favorable data. Bias as seen from the presented

literature is a problem that is sometimes performed willingly or done without a conscious

effort but there are situations when bias may lead to ethical dilemmas. According to

Glaser, Spencer, and Charbonneau (2014) racial bias is a form of bias that can hinder the

study because of the perception some researchers have regarding particular sample

groups, which could influence the manner in which certain data is collected and analyzed.

As a result, according to Hansen, Gerbasi, Todorov, Kruse, and Pronin (2014) researchers

must be careful to have their study reviewed from a different perspective so that it can

avoid the pitfalls created by bias regardless of the type of bias, which can at times go

unnoticed by the researcher. The issue of bias as seen from the literature can become an ethical issue because of the manner in which the researcher decides to present the information that was collected, which may contain opposing viewpoints contrary to that of the researcher.

Other ethical concerns that could manifest in a study is related to bias, in that if a study occurs in an environment where the researcher is emotionally invested, it may lead ethical concerns such as not reporting data that contradicts the study or only interviewing or observing participants that feel the same regarding the study and leaving out participants who may feel different and not allowing them to express their views in an equal manner. In addition to bias a potential ethical concern could be the treatment of the data in terms of gaining the trust of the participant to offer such data. According to Snow et al. (2016) a researcher should be respectful when collecting data from a participant as well as be diligent in explaining as to why the data is necessary for the study. Furthermore, Peter and Friedland (2017) reiterated that if the researcher is to remain fair and ethical concerning his study, he is to remain vigilant and protect the data that he has acquired with the blessing and support of the participant. In conjunction according to Parker and Bull (2015) the securing of data must be of the uttermost importance for the researcher so that it abides by ethical standards and protects the participant. What can be conveyed from this statement is that the researcher must protect the data collected as well as the participant so that the study is abiding by the strict ethical codes for conducting a proper study. Issues such as bias and the protection of data and the participant are

potential ethical concerns that must also be a priority for the researcher to be aware and strategize a plan to avoid such concerns if he is to conduct a successful study.

Methodology

A procedure that must not be overlooked is the process in which the participants or sample group is selected because it is through the sample group from which the data will be collected in order to justify the study, create awareness, and answer the research questions that have been posed in the study. According to Creswell (2012) a researcher must not overlook the issue of the sample size because it is through the sample size that the researcher will collect the data that is required in order to elucidate a particular meaning that will answer the research questions and accomplish the objectives of the study. Moreover, Ravitch and Carl (2015) argued that sampling must be conducted with a purpose so that only meaningful data is collected, and time is not wasted sorting through data that cannot be utilized in a purposeful manner in the study. In Addition, according to Maxwell (2012) the participants or sample size must be selected in relation to the type of research questions being asked in the study. These statements reflect the standard by which a researcher must select his sample size when performing fieldwork. The ability to select the proper sample size is as seen, is related to the research question in that enough relevant data must be collected with the intention of being able to thoroughly answer the research questions. In a qualitative study the size of the sample is dependent on the ability to generate enough data to satisfy the research questions as there is no specific set size that must be obtained for a successful study. According to Robinson (2013) the perfect sampling strategy for most qualitative studies must adhere to four basic points, which are

that the selected sample size must be coherent, achievable, innovative, and appropriate to the goals and objectives of the study. However, according to Sykes, Verma, and Hancock (2017) also concluded that when deciding on a sampling strategy, a researcher must also decide whom they do not wish to interview which is a decision based on the ability to gather relevant data that will be of benefit to the study and not a choice solely based on trying to gather data without a clear plan or objective. This statement illustrated perfectly the ideal strategy for developing a sample size that will be able to generate the necessary data for being to validate the study as well as answering the research questions.

The application of this concept was signified in that my sample size was appropriate in that it made sense to interview the participants from which I collected the data from as well as it met the goals and objective of my study. Furthermore, the sample size must be that which will contain the most reliable information so that any data that is collected is reliable and is able to be used in a study (Trotter, 2012). As I mentioned in the previous chapter my sample size was related to the directors of the 13 planning and service areas from all across the state of Illinois. The state of Illinois as stated earlier has a total of 13 planning and service areas, which is number that was achievable in terms of being able to interview these 13 directors. Being able to access the 13 planning and service areas directors gave me the sample size needed to collect the critical data to not only answer the research questions but also to add validity to my study. This sample size was justified in that is included every director from the state of Illinois which conveyed that the study will include a large sum of expert data regarding the current policies on elderly abuse as well as the current response to elderly abuse which was vital to the study

in terms of the study's objectives. Based on the type of research questions which were asked the directors of these service providers are the only source that produced the relevant data needed which again is why this sample size was chosen and determined to be the only sampling strategy required to fully conduct this study. Having determined the sample size the next step in the process was to determine how to gain access to these participants, which for the purposes of this study was performed through telephone calls and emails to schedule interview times and dates as well as reschedules if needed.

   This strategy was achievable in that it allowed the participant two different methods of contacting me and as well as myself for being able to contact these participants. Further detail was discussed in later sections but to establish my strategy for contacting these participants I have conveyed what my plan is for such procedure. The basic fundamental was to communicate to the participants that I am a doctoral student looking to explore the current policies that are in place concerning elderly abuse and simply wished to interview them in hopes of generating awareness but to also give them a voice where they gave their experiences in the form of narratives. I also ensured them confidentiality as well as giving them the authority to end the interview if they felt uncomfortable and that they also may remain anonymous if they so desired to avoid any retribution. As well intended as my strategy was for developing a sampling size and setting a set of guidelines for my sample size I also considered whether or not I have encountered what is known as data saturation. Data saturation is known as a limit in which a researcher has collected enough data to the point that no new ideas can be extracted (Ravitch & Carl, 2015). Furthermore Yu, Abdullah, and Saat (2014) argued that

data saturation is a problem that should be avoided which is why it is important to have an objective when collecting as well as analyzing the data. In addition, data saturation is said to be achieved when these two principles of having heard it all and understanding the data have occurred (Hennink, Kaiser, & Marconi, 2017). The understanding of this idea of saturation was important to keep in mind because although I was trying to interview all 13 planning and service area directors I stayed alerted to the fact to not place myself in a situation where I continued to hear the same type of data repeatedly, which is why it was imperative to ask follow up questions so that I gained more data rather than just be satisfied with the responses to the initial interview. According to O'Reilly and Parker (2012) data saturation should be used as a marker but should not dictate the manner in which the researcher collects his data.

However, Morse (2015) iterated that data saturation is an essential tool in which to decide if the study has achieved rigor or has been exhausted to the point where every possible question that may be asked is answered through the study and its data. This conclusion is further supported as Constantinou, Georgiou, and Perdikogianni (2017) iterated that saturation is the benchmark for which a qualitative researcher is able to achieve rigor in his study. The main conclusion that is gained from understanding data saturation is that it can be used as a benchmark in regards to the sample size that will guarantee such a saturation and thus serve the purpose of communicating to the researcher that he has collected enough data to support his study and thus answer the research questions. As I have stated, my strategy was not only to interview all 13 directors if possible but also to try and ask for further details when interviewing the

participants and asking follow up questions if necessary so that rigor was achieved in my

study and saturation where I knew I had enough data. I also was organized in knowing

what data I did have so that during the process of interviewing each participant I was

constantly trying to collect new fresh ideas that helped to strengthen my study and

avoided data saturation early in my study. The main objective in this section was to

ensure that when selecting a sampling strategy to remember the concept of data saturation

so to avoid repeating myself but also at the same achieve rigor in my qualitative study.

Instrumentation

Instrumentation may be considered the methods in which a researcher can acquire

essential data for his study regardless of methodology. As a researcher operating under

the qualitative research design and methodology, I utilized secondary data as well as the

interview as the two main instruments that helped to assist in collecting the necessary

data for this study. The interview was essential for this qualitative research as previously

established the interview was needed to collect data that was of the personal narrative

variety. According to Dickinson-Swift, James, Kippen, and Liamputtong (2009) emotion

work or studies that involve sensitive topic often require the researcher to gain personal

data, which can be accomplished with the data collection instrument known as the one on

one interview. Furthermore, Pezalla, Pettigrew, and Miller-Day (2012) argued that in a

qualitative study the researcher has an enormous amount of flexibility as he is the

primary instrument in the study, which in conjunction with the data collection of the

interview he can influence how the process is performed. Secondary data or published

data is the process of using previous research to extract new meaning in addition to newly

collected data from methods such as observation or interview. According to Corti and

Fielding (2016) in the 1990's the idea of published data through means of the internet or

other sources had begun to emerge as a new technique for collecting data that was

different from the traditional methods. Moreover, Dunn, Arslanian-Engoren,

DeKoekkoek, Jadack, and Scott (2015) concluded that the use of secondary is a crucial

strategy in being able to collect data in a setting such as a service provider type facility

such as a nursing facility or any other related type environments.

Lastly, Corti, Fielding, and Bishop (2016) asserted that the use of published data

in a correct manner can lead to new methods and styles of presenting the previously

researched data in a new light as well as being able to generate new and original findings.

What was conveyed from these two types of instrumentation is they both can give the

researcher two different avenues of data which can be used in various areas of the

research. As a researcher, the instruments used to collect the data must be reasonable and

relevant to the task at hand because it is essential that the data received from these

instruments help to strengthen the study by the amount of useful information. The overall

objective of a collection instrument is that it must yield sufficient data to answer the

research question, which is why as mentioned earlier the researcher must select the

proper instruments that will answer each research question individually. The research

questions that were posed for this study related to personal and sensitive data, which were

substantially served through the use of the interview which collected data from the 13

planning and service areas directors and secondary data was used to obtain financial data

as well as data on the issues of elderly abuse, as the two data collection instruments along

with myself, the researcher, the primary instrument of the entire study. Every facet of the

research was essential, and the data collection instrumentation portion of the study was

just as significant because if sufficient relevant data cannot be collected then the study

does not have evidence to support whatever point of view the researcher had taken while

conducting the study. As a researcher, I had to strategize of how I would be able to

collect the data that I needed to answer the research questions, which is why as I had

selected the interview and secondary data as the two data collection instruments for this

study.

Procedures for Recruitment

Having chosen the interview and secondary data as the data collection instruments

where I had collected the data myself it was also important to describe the process that I

deployed to collect the aforementioned information. Before I was able to commence on

illustrating my strategy regarding recruitment and participation in conjunction with the

data collection instruments I have chosen, it was important to restate the research

questions so as to not only demonstrate the relevance of my data collection instruments

but also to how they were carried out in practical terms so that anyone reading this study

is able to comprehend how the study was executed and convey its replicability for future

studies.

1. RQ1: How do the 13 planning and service areas directors in the state of
   Illinois evaluate the current policies related to elderly abuse?

2. RQ2: What impact does funding have on the measurable outcomes of the
   13 planning and service areas and the 45 provider agencies?

The data collection process for the first question revolves around being able to collect data on the personal narrative of the directors of the 13 planning and service areas, which as previously mentioned was collected utilizing the interview as the primary data collection instrument. The practical data collection procedures worked in the following manner. The data was collected from the directors by myself as I was the primary instrument that directed this study. The data was collected on a schedule as I had interview 13, which are dispersed throughout the state of Illinois. The duration of the data collection process depended on my ability to schedule appointments with the directors, which in this case lasted three weeks due to the availability of these directors. Prior to scheduling the interviews, a letter of participation (Appendix A), a consent form, and the interview questions (Appendix B) were emailed to the 13 directors with further detail regarding the interview. The data was collected through pen and paper and then transferred to computer and saved in a portable disk drive. However, if I was unable to recruit all 13 directors, which in this case I was unable to gain participation from five of the directors, which led to my back up plan of using secondary data in combination with the data collected from the participants. The debriefing process was simple as I told each participant through email thank you for their participant in this study and that the data collected was safe and secured and that if they wish to add more to their interview, they may email me with further information. I did not conduct any follow up interviews because the data that had been collected was relevant enough in regard to the research question. However, in the study that I was not able to meet face to face with each of the participants as each participant wished to conduct the interview through email.

In regards to the second research question the data collection instrument that was used was secondary data. Secondary data was used to collect the financial data needed to address the question. The process mainly involved accessing financial figures of the federal, state and local nonprofit and the conducting of data analyzes which answered the second research question in a satisfactory manner. These procedures that were illustrated are the strategy that implemented when I collected data through the use of the aforementioned data collection instruments.

Data Analysis Plan

Collecting data was just the beginning as it is imperative for a researcher to decipher the data and to give it meaning so that it not only supports the study's objectives but also answer the research questions and thus give the reader a clearer view of what the researcher was attempting to accomplish in the study. Being that the study conducted was a qualitative study it adhered to the qualitative data analysis methods such as coding. To summarize, the data collected for the first research question dealt with acquiring the personal narratives from the directors of the 13 planning and service areas as the main goal was to know how these directors felt regarding the current policies on elderly abuse as well as the director's feelings regarding the current response towards cases of elderly abuse in the state of Illinois and the importance of funding. According to Hruschka et al. (2004) data accrued from interviews may be best analyzed through a process known as coding.

Coding can be thought of as the process for giving meaning or sentiment to qualitative data, which often consists of personal experiences, narratives, phenomenon or

data that explains why people feel about a certain policy or issue (Saldana, 2016). This statement conveys the reason why chose coding to be the method to analyze the data that was collected from these directors as I was able to breathe meaning to the raw data collected. Moreover, Campbell, Quincy, Osserman, and Pedersen (2013) asserted that the majority of studies involving social issues require the need for coding in order to perfectly analyze and organize the data. However, concerning personal narratives the best type of coding that will extract the most relevant data is the coding process known as content analysis where the content is analyzed based on subjects or descriptions found within a given data set (Anderson, 2006). In addition, Palmer, D'Orazio, Kenwick, and Lane (2015) cautioned that researchers must be careful in coding their data so as to avoid confusion. To be able to counteract any confusion, a researcher should plan ahead as to what categories he desires to have and therefore code accordingly to be more effective when performing this type of data analysis on data that is collected from personal narratives (Popping, 2015). In relation to my study I have to ensured that I had selected particular categories so that the codes were relevant and were useful in being able to address the particular research question. In regards to analyzing secondary which was connected to the second research question, where it was essential to collect sensitive financial data from the federal, state and local non-profit level, so as to better analyze secondary data. According to Corti, Fielding, and Bishop (2016) contextualization is a potential useful method in being able to successfully analyze secondary data.

Furthermore, Dunn, et al. (2015) emphasized the concept of secondary analyzes as having the functional ability to test opinions and assertions because of data that has

been previously conducted in the form of secondary data. In addition, Corti and Fielding

(2016) proposed that the use of secondary is its own analyzes in that the researcher is

searching for particular sets of data that is corresponding to a physical topic or question.

Self –reflexivity is another method in which a researcher may be able to further analyze

the data collected from interviews and other types of data as it gives the researcher the

ability to examine just how important certain data is based on the context (Pezalla,

Pettigrew, & Miller-Day, 2012). However, Dickson-Swift, James, Kippen, and

Liamputtong (2009) warned that research must not become too emotionally involved in

the study as it may hinder the data analyzes process. One of the most essential concepts

for data analyzes regarding secondary data is a similar concept to coding in that the

researcher must create themes so that the data extracted from secondary data is analyzed

in a constructive manner (Yardley, Watts, Pearson, & Richardson, 2014). The ability to

collect themes from secondary data is performed through a type of data analyzes known

as thematic analysis, which helps to assist in gaining the most relevant data from

secondary data sources (Weisser, Bristowe, & Jackson, 2015). As a researcher whether it

was analyzing through coding or thematic analyzes I used both methods as both types of

data analyzes strategies were effective in analyzing personal narratives from interview

data or secondary data in that both strategies gave me the researcher the most potential

useful data. Etkind, Bristowe, Bailey, Selman, and Murtagh (2017) recommended that

combining coding and thematic analysis helps a researcher to better analyze his data in

the most efficient manner as it makes the data easier to use and understand. Data analysis

is an important part of any study and as demonstrated I had chosen to implement coding

and thematic analysis as two primary data analysis strategies that assisted me in

abstracting all the important themes from the data collected and also being able to answer

the research questions that were posed in the study.

Issues of Trustworthiness

A study is only as strong as its ability to inspire trustworthiness in the eye of the

reader because if there is no trustworthiness, the study is unable to inspire hope or create

any positive influence in the community. Creswell (2012) iterated that a researcher may

establish trustworthiness if he is able to control issues such as credibility, transferability,

dependability, and confirmability. According to Castro (2012) the ability to establish

consistency in every aspect of the study will help to create credibility, dependability as

well as establish the validity of the study. Furthermore Terry, Schwede, King, Martinez,

and Childs (2017) concluded that for a study to have strong reliability, dependability,

confirmability, and transferability the study must search out its inconsistencies and

develop strategies to ensure that whether it is giving an interview or analyzing the data,

the process and procedures are the same so that the results are valid in that every type of

data was performed under the same circumstances. However, Landrine, Corral, Hall,

Bess, and Efird (2016) asserted that reporting issues that may lead to inconsistencies are

also important in establishing a strong study because it acknowledges that there may be

some issues in the study thus preserving its validity. In addition, according to Kliman

(2015), an issue that may hinder the trustworthiness of a study is the issue of respondents

not supplying the requested data or giving data that is not useful to the study. Another

issue that is a potential threat to a study's trustworthiness is the consistency of the codes

and its meaning because with multiple types of data, a researcher must be consistent in the type of codes he implements so that the final study is clear with no mixed meanings (MacPhail, Khoza, Abler, & Ranganathan, 2016).

Another factor that affects the trustworthiness of a study is its content validity. According to Wynd, Schmidt, and Schaefer (2003), content validity is important because the source of the data helps to determine the trustworthiness of the study so the more expert the source is, the more validity and trustworthiness the study will possess. In addition, Morse, Barrett, Mayan, Olson, and Spiers (2002) concluded that haven content validity helped to ensure rigor in the study which has the positive effect of creating trustworthiness in a study. Moreover, Hsieh and Shannon (2005) argued that content validity is an excellent manner in not only to develop knowledge of a certain issue but also gives the study trustworthiness due to its content. The ability of the content to demonstrate expertise is what will influence the level of trustworthiness that a study can convey to the reader (Elo et al., 2014). Having the right amount of relevant content is also another essential element for providing content validity to the study that will result in the study containing trustworthiness (Ayre & Scally, 2013). However, Burke (2017) concluded that one method to aid content validity is to establish standards that can be measured which may help to eliminate issues such as bias which hurts the trustworthiness of a study. The idea of setting standards such as the type of data collected and source of the data is crucial to the ability to create good content validity (Lund et al., 2014). A final aspect for establishing trustworthiness in a study is the researcher's ability to detect his own bias and reduce it so that it does not reduce the reliability, credibility, transferability,

and confirmability of a study. Researcher bias is described as a situation where a researcher allows his point of view influence the manner in which he collects and analyzes the data (Leal & Hess, 1999). According to Garbarski, Schaeffer, and Dykema (2016), the trustworthiness of a study may be harmed if the data collected is manipulated by the researcher either knowingly or subconsciously. Credibility is influenced by the type of interview where the type of questions posed are free from the researcher's influence, and the data is collected without bias (Buchbinder, 2010).

However, Blakely and Moles (2017) iterated that the use of secondary data or published data along with data collected through interviews may preserve the validity of the study and reduce bias from the researcher. Researcher bias according to Seitz (2016) may be kept in check by the development of a partnership between the researcher and the participant to ensure both parties are aware of the objectives concerning the interview. Furthermore, Pinsky (2015) advised that the researcher remain professional and be vigilant while conducting the interview and not allow personal motivations influence the interview. Becoming neutral and objective is a strategy that a researcher may implement to ensure he does not allow his bias to interfere with the interview and research process (Roulston, 2010). Moreover, Landrock (2017) warned that in addition to researcher bias, a researcher must report the data as it is and not distort it to fit the study because falsifications of the interview may hinder the trustworthiness of the study. In addition, Loosveldt and Beullens (2014) urged that researcher does not influence or lead the participant to respond in the desired manner but rather answer honestly so as to validate the data collected. Lastly, a strategy to help aid a researcher in conducting a credible

interview is through practice and use resources provided by academic programs so as to ensure no bias and establish trustworthiness in the study (Mann, Yanson, & Lambert, 2017). The literature clearly established strategies that may be used by any researcher to establish trustworthiness in his study and avoid validity issues, which may hinder the study. Regarding my dissertation, I employed the strategy of setting standards and making sure these standards were followed with no exception as well as using published data to help support the data collected from the interviews. I also reported all results as a method in which to ensure my bias did not influenced the study in an adverse manner.

Ethical Procedures

In any academic research there needs to be ethical standards that govern every study and that must be abided by each researcher who attempts to conduct a study. The institutional review board or IRB is an academic board that ensures ethical standards are followed by academic researchers. According to Tsan and Nguyen (2017) the institutional review board is an academic organization put in place to protect participants as well ensuring ethical standards are followed if a study is to be conducted. Moreover the IRB was established to review ethical standards and practices and enforces these protocols with the main objective of protecting study participants (Tsan & Tsan, 2015). Data collection instruments such as the interview should be evaluated by the IRB to ensure that interviewees are protected and that there are no ethical violations before the interview may be conducted (Florczak & Lockie, 2015). However, besides the ensuring of the security of human participants, the IRB must also promote valuable research that is beneficial to society and is free of ethical concerns (Morris & Morris, 2016). In addition

any study that concerns social issues and may have human contact should be reviewed by the IRB and the researcher should seek approval before advancing to conduct such a study (Suter & Suter, 2017). As a researcher, one must be wary of ethical standards and seek IRB approval and advice when conducting any study to ensure compliance with standards set by the IRB (Borgatta, Kaufman, Kelly, Babaian, & Banks, 2017). Activities such as recruitment of participants, treatment of participants is monitored by the IRB and it is imperative for the researcher to work alongside the IRB to ensure a successful study because a study must not only be valuable it must be ethical sound (Desai et al., 2017).

What may be concluded from the literature is that as a researcher it is important to protect the participant and work along with the IRB to ensure no there are no ethical standards being compromised. The strategy that I had implemented was one that worked with the IRB to not only review my interview questions but also to ensure I recruited participants in a manner that was safe for the participant. Any ethical concerns were discussed with the IRB and my chair so that I was abled handle any potential ethical situation in the most appropriate manner. If participants were unable to meet the scheduled interview, attempts were made to reschedule but if participants did not want to participate in the study then they were allowed to leave the study because as the IRB instructs, the participant must be protected and not coerced to do anything. For the purposes of this study only five of the thirteen directors declined to participate in the study. There were no ethical issues with the participants while I collected data from those who wished to participate; however, with the directors I was not able to collect data from, I used secondary data to fill the gaps. The overall objective was to meet the ethical

standards of the IRB so it was imperative to have strategies to counter any unforeseen

events such as participant refusing to participate or early withdrawal of the participant.

Another ethical concern was the issue of data storage and handling of confidential

information from the participants who have decided to be interviewed for the study.

According to Hunter, Ede, and Whiddett (2014) the issues of data confidentiality remains

a great ethical concern that requires immediate resolution so that it protects the

participant and ensure proper research standards are being obeyed. Fleming (2015)

concludes that sensitive collected data be shared with few due to the data's extreme

nature because sensitive data is deemed privileged data and should therefore be protected

by the researcher. Furthermore Sher (2015) concluded that the researcher and participant

should establish a partnership where each party feels comfortable in the process of the

data collection so that confidentiality may be generated. Moreover, Pezaro, Clyne, and

Gerada (2016) iterated that confidentiality be established and maintained throughout the

study and should never be compromised if the study is to meet ethical standards and

practices. Finally Lowman and Palys (2014) advised that a researcher should make his

main prerogative when dealing participants is to not only protect the participant from

harm but also maintain the confidentiality of the information he is given by the

participant.

Last but not least another issue that should not be overlooked is the storage of the

data which not only allows access to the researcher but also ensures the confidentiality of

the data collected. Services such as cloud service providers have become available to

researchers who wish to have access to their data regardless of their location (Wei, Liu,

Zhang, & Niu, 2016). Furthermore according to Sun, Zhang, Xiong, and Zhu (2014) cloud computing has enabled confidentiality as the data may only be access with a subscription that is of low cost to the researcher. However, Liu, Wang, Yang, Jiang, and Li (2017) cautioned that despite the benefits of storing data through a cloud system, the researcher must ensure he is constantly updating security features so that the data is constantly remaining confidential and secured with only the researcher having access to the data. In addition, Park, Lim, and Kim (2015) suggested that not only protecting the participant is an essential function of the researcher but also ensuring the security of the data when using mobile devices to collect data because of their potential vulnerability if proper actions are not taken to ensure security of mobile devices such as smartphones or cloud systems. According to Nielsen, Andersen, Jensen, Nielsen, and Chorkendorff (2014) data storage should be centralized so that there is less risk for data loss and corruption. The strategies learned from the literature is that as a researcher I must select the best storage system, which for the purposes of this study was an external hard drive, which has mobile capabilities and can be access anytime by only myself thus protecting the participant and the data itself. Data must also be safely stored until the research has been successfully completed and the study's findings have been verified by an external party. Ethical standards must always be a priority as well as routine for the researcher so that the study produced is trustworthy because it was conducted under ethical standards approved by the IRB.

Summary

This chapter delved into the rationale for the selection of the research design as it sought to generate an understanding as to why in this case the qualitative design was chosen. This section on the research design gave the reader an apparent reason as to why only the qualitative design can answer the research questions and why this particular design is beneficial to the study while other study designs such as the quantitative and mixed methods were not suitable for this individual study. The concept of the role of the researcher and the responsibilities that are connected with being a researcher are so ever amplified under the qualitative research design. What is learned is that under the qualitative design and methodology the researcher is the primary instrument and he alone must organize the study, collect the data, and analyze the results in a manner that is understood by the reader of this study. The role of the researcher is one that cannot be taken gently because it is up to the researcher if the study is to become successful. Another issue that was explored is the ability for a researcher to identify the population he is seeking to study and components such as sample size and the procedures needed to find the sample size was researched in depth so that the study could be studied for future studies by being able to view the process taken in this study such as selecting a sample to study and the recruitment process for acquiring participants from the established sampling size.

Selecting the sample size is one aspect of collecting data while choosing the data collection instrument(s) is another choice that must be done so that the most relevant and credible data can be collected. This study utilized and implemented interviews and

secondary data as the two main data collection instruments. In accordance with the type

of data collection instruments the process for using these instruments was explored with

issues such as from whom where would the data be collected as well as how the data

would be recorded was established. Data analysis methods were also established so that it

can be clear to anyone reading this study that the data would be observed in a particular

manner in order to extract particular data that will be relevant to answering the research

questions and establishing the objectives of the study. Data analysis methods such as

coding and content analysis were explored and established as the data analyzation

techniques that were implemented in this study. Another concept that was studied in this

chapter was the idea of establishing the trustworthiness of the study. The establishing of

trustworthiness in a study allows the study to display essential features such as

credibility, validity, transferability, confirmability, and dependability. These features give

the study a reputation that is one containing knowledge that the data observed in the

study was collected from reliable sources and followed ethical standards that was

established by the IRB. Conducting a study that follows the ethical standards set by the

IRB ensures not only the safety of the participants but also ensure trustworthiness of the

study in that the data was collected, stored, and analyzed in a manner that followed

proper protocols. This chapter emphasized the primary ideas of establishing a proper

research design, which was executed in a consistent manner that reflected the design from

the role of the researcher to the data collection instruments as well as the manner in

which the data was analyzed. The chapter gave the reader an overview as to how the

study was executed so that if needed it could be duplicated in the manner that would generate similar results thus haven given credibility to the study.

 The following chapter will address the results gathered and analyze its significance in connection to the research questions.

Chapter 4: Results

Introduction

The purpose of this qualitative study was to showcase the effectiveness of the

current policies and the role that these policies played concerning the 13 planning and

service areas regarding the problem of elderly abuse. Determining the effectiveness of the

current response and the policies was based on the findings this study generated and thus

determined the role played by the current policies. This study looked to increase the

knowledge base of the social problem of elder abuse through the examination of the

current response and reaction to incidents of elderly abuse based on the current policies

and what policies are utilized to respond to cases of elderly abuse. This study used the

qualitative approach of the interview and secondary data to explore the current policies

that guided the 13 planning and service areas in responding to elderly abuse and to

conclude if the response was adequate. Through the narrowing of the focus of my study

on how the 13 planning and service areas reacted and investigated elderly abuse, I sought

to improve the services received by the elderly by navigating through the weakness of the

current response protocols. This research answered the two research questions that were

asked in the earlier chapters: how the directors of the 13 planning and service providers

regarded the effectiveness of the current policies concerning elder abuse. This research

also addressed the issue on measurable outcomes the impact funding has on the 13

planning and service areas and the 45 provider agencies.

The following chapter had the primary tasks of giving the reader insight into the

demographics of the study, the collection of the data, analysis of the data, evidence of

trustworthiness and finally the results of the study concerning the research questions that were posed in the study.

Demographics

The participants chosen for this study were the directors of the 13 planning and service areas in the state of Illinois. The interviews took place through email as was all communication between myself and the directors. However, due to the low number of participants, which was 5 out of the 13, secondary data was used to help fill in the gaps, as was mentioned in Chapter 3 concerning the issue of participant level. This issue was explored further in the results section of this chapter. However, to establish the main demographics of this study and adequately address the first research question it was important to state the primary demographics targeted by the study. The second question was discussed entirely through secondary data as it related to funding and the measurable outcomes impact on the 13 planning and service areas as well as the 45 service providers in the state of Illinois caused by funding.

According to White, Sienkiewicz, and Smith (2018), many leaders within planning and service provider organizations had a sense of wanting to ensure victim safety and provide the best assistance as possible. However, according to Schmucker and Illar (2001), there were health care personnel who felt limited in their abilities to help victims of elder abuse due to the current policies. Furthermore, many service providers are in charge of delivering services and assistance to a significantly diverse population, which tended to present a challenge (Noureldin, Abrahamson, & Arling, 2018). According to Newquist, DeLiema, and Wilber (2015) directors not only have the pressure

of responding to victims of elder abuse but must also deal with the strain of keeping a workforce that is abiding by state and federal regulations. Planning and service provider directors must not only have to deal with a diverse elderly population but also a different set of medical and mental issues that plague the elderly community (Nayak, Mohapatra, & Panda, 2019). The 13 planning and service area directors are assigned to different areas within the state of Illinois and are exposed to a diverse elderly population, which served the purpose of acquiring the best set of data that will address not only the current policies but the effectiveness of these policies in handling cases of elder abuse. Each director is assigned a certain number of agencies to manage out of the 45 total agencies that are located throughout the state of Illinois. The most significant number of agencies that are under the jurisdiction of one director is ten, while the lowest number of agencies a director oversees is just only one agency. The directors were of different backgrounds as some directors were male while others were female and even one of the directors was new to his position. The breakdown was nine of the directors were female, while the remaining five were male. These 13 directors are the central personnel that deliver and ensure procedures are followed in the 45 provider agencies all across the state of Illinois.

Data Collection

The data was collected through multiple channels depending on the research question, which in this study there are two research questions. Regarding financial information for the second question, it was collected through secondary data. Federal financial information, state financial information and other sources of funding for the 13 planning and service areas and the 45 provider agencies were located through the

websites of each of the 13 planning and service areas as well as the 45 provider agencies

and PDF files from federal and state websites. The secondary data collected was saved on

the external hard drive. Concerning the first question, the data was collected from willing

participants, the 13 planning and service area directors and secondary data. Each of the

13 planning and service area directors was contacted through email. The email explained

the purpose of the email itself as well as having the consent form, and the interview

questions (Appendix B).

The email allowed the directors to contemplate whether or not they wished to

participate in the study. The directors were given a choice of interviewing through email,

telephone or in person. The email also instructed the director that if he or she wished to

participate in the study that they had to sign the consent form, which described the

interview process as well as the provisions allowed to the director. The directors were

informed that if they signed the consent form that they must print a copy for their records.

The consent form included a brief explanation of the purpose of the study and why they

were selected as the target participants for the study. Instructions of the interview format

were explained to the director so that they could determine which interview format was

more suited to them. The issue of confidentiality was discussed to protect the director's

identity but also to ensure the directors that they would not have to worry about the

information they provided being unsecured or viewed by those not part of the study.

Also, the idea that their participation in this study would not interfere with their job was

also discussed because in keeping with the Institutional review board guidelines the

participants should be protected in every way even from their organization, which is why it was necessary for the level of confidentiality and anonymity.

The consent form also provided contact information to myself as the researcher, my advisor, and the research participant advocate to give the director the ability to ask questions or concerns concerning the nature of the study. The consent form also included the Walden University approval number 01-04-19-0564774 which expires on January 3, 2020. Finally, the consent form, stressed the idea that the director's participation in this study was entirely voluntary. There also would be no form of compensation and that the individual participant had the right to stop participating or avoid answering any question that they were not comfortable answering and that there was no compulsion for their participation in this study. The interview questions (Appendix B), was included for the primary reason of giving the director an idea of what the interview experience would entail and thus made him or her more educated over the purpose of the study and allow them to make a decision on whether or not they would be a participant in the study. The majority of directors responded within a week or two after the initial email was sent requesting their assistance in this study. Five of the directors signed the consent and emailed it back for my records as well as to comply with the standards set by the institutional review board form and their responses to the interview questionnaire were also emailed along with the consent forms. However, three of the directors responded but did not sign the consent form the remaining five directors did not respond to the emails and were classified as having declined participating in the study. The responses from all

the directors were downloaded and saved on the external high drive to ensure its confidentiality and security.

The email interviews were completed within three weeks as the amount of time depended on the director as I did not want to rush or have the directors feel any pressure to be able to obtain the best results as possible. The responses as stated earlier were downloaded and saved on an external drive, where it could be securely accessed and analyzed in regards to the research question and purpose of the study. As mentioned secondary data was used to fill in the gaps left by the five directors who did not wish to participate in the study. The secondary data was collected from scholarly journals and cases studies regarding planning and service area personnel and their experiences in responding to incidents of elder abuse. The topics that the secondary data covered was based off the interview questionnaire to keep the data relevant to the purpose of the study. All the collected data was organized in accordance with the research questions and was coded appropriately as well as analyzed. No deviations were observed as every protocol stated in chapter three was followed to preserve the legitimacy and the dependability of the study

Data Analysis

As established, the interviews were conducted through email and within three weeks to give the participants plenty of time. However, for the study to be deemed ethical, it had to abide by the restrictions imposed by the institutional review board. These rules translated into how the data was analyzed in that some aspects of the study had to be coded in a way that allowed for the best data to be collected but also offered

maximum protection for the participants. How certain elements such as the name of the

13 directors and 45 agencies as well as the name of the organizations from where victims

of elder abuse may seek help were coded as shown below in Table 1.

Table 1

Participant Characteristics

Illinois Regional Area	Title	Number of Agencies	Agencies Name
Organization 1A	Director 1A	4	Agency 1
Organization 2B	Director 2B	8	Agency 2
Organization 3C	Director 3C	1	Agency 3
Organization 4D	Director 4D	1	Agency 4
Organization 5E	Director 5E	7	Agency 5
Organization 6F	Director 6F	1	Agency 6
Organization 7G	Director 7G	4	Agency 7
Organization 8H	Director 8H	1	Agency 8
Organization 9I	Director 9I	1	Agency 9
Organization 10J	Director 10J	1	Agency 10
Organization 11K	Director 11K	1	Agency 11
Organization 12L	Director 12L	5	Agency 12
Organization 13M	Director 13M	10	Agency 13
			Agency 14
			Agency 15
			Agency 16
			Agency 17
			Agency 18
			Agency 19
			Agency 20
			Agency 21
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			Agency 32
			Agency 32
			Agency 34
			Agency 35
			Agency 36
			Agency 37
			Agency 38
			Agency 39
			Agency 40
			Agency 41
			Agency 42
			Agency 43
			Agency 44
			Agency 45

As shown, the directors were coded not only with a numerical value but also with an alphabetical letter to better distinguish it from the 45 agencies which were given merely a binary number. Director one was coded as Director 1A and so forth. The table shows the 45 agencies a director is responsible for ensuring operates within the policies and protocols established by the state and federal government. The 45 service providers were coded as mentioned with a numerical such as Agency 1, which allows for each agency to remain confidential and secured so as not to reveal any information that could compromise the study. This coding strategy was created to allow for the data collected to be used without compromising the planning and service area directors and the 45 service providers, which was necessary to adequately and fully address the research question in a manner that is clear to the reader and thus validate the study. The coding strategy used in this study further secured the data that was collected from the participating directors so as allow the data to be used without revealing any sensitive data such as names or locations that would enable a person to figure out the identities of these directors and agencies. As mentioned in chapter three thematic analyzes played a significant role in being able to analyze not only the data collected from the interviews but the secondary data as well as some of the specific themes included funding both state and federal level of funding, policies, personal perspective state policies, federal policies and so forth. The goal of the themes was to assist in answering the research questions that were posed at the beginning of the study. These themes helped in being able to code the data in a manner that could be

readily understood by the reader and thus get the complete meaning and purpose of the study.

The data analysis method of self-reflexivity was used to analyze the secondary data that was collected to fill in the gaps from the lack of participants in the interview, which as established earlier was only five directors out of the 13. Self-reflexivity ensured that the secondary data collected was reliable because of the context and its relevance to the codes and themes as well as the connection to the research questions. The data received from the interviews were organized, coded and placed under the specific categories such as state policy, federal policy, effectiveness, funding, and personal perspective. Highlighting particular information from the secondary data and putting it in the specific categories listed aided in being able to explain its relevance and importance to the reader. The purpose of the data analysis strategy was to answer the two research questions. Following the data analysis strategy that was created earlier in chapter three of this study was vital in being able to effectively code and categories both the interview data and the secondary data because it focused the analysis because the primary intent of the data was to answer the research questions.

Evidence of Trustworthiness

Trustworthiness and establishing it in the study was very important because it gives credence to the hard work in conducting the study but also gives reassurance to the reader that the study he or she is examining was completed with the highest level of credibility and dependability. Before any research was conducted, the study had to undergo extensive examination from the IRB as well as from the study advisor so as to

ensure the study would follow certain standards and protocols and that nothing in the study would deviate from what was approved. According to Creswell (2012), the researcher must think and implement strategies that maintain the accuracy or rigor of the study or engage in a practice known as validation strategies (Creswell, 2012). The activities that were practiced in this study was to be consistent in every action performed. The participants, who are the 13 planning and service area directors were chosen as the main participants of the study for their expert and firsthand experience regarding the subject of elder abuse and the policies that influence the response to cases of elder abuse. This sampling strategy helps to maintain the validity of the study because of the type of expert knowledge, which will allow the data that is collected from the interviews to be credible and dependable. Being consistent in the manner in which the participants were contacted and the same information offered to each of the participants was the same with no deviations so as to blemish the study.

The amount of time given to each participant had to be equal so that the data derived was valid and no participant felt rushed or pressured. The interview questions were structured in a manner that gave the participant plenty of time in that each item was geared to inquire about the director's perspective regarding the issue of elder abuse. All the data collected from the interviews were done in the same manner for each data set, with the results of the data being downloaded into the external high drive as a way to secure the data. Secondary data had to be collected from reputable scholarly sources; whether it was financial data or case studies, it had to be obtained from academic sources and legitimate sites. The secondary collected also was downloaded and saved on an

external hard drive. Uniformity was the objective used in this study so as to avoid any bias or divergence. As the primary research instrument, my duties were to determine that all data derived from secondary sources were consistent and met the standards set by Walden University because if a study is to be trustworthy, the data contained in the study must be acquired from credible sources. The data collected from the interviews in conjunction with the secondary helps to not only built a stronger study but conveyed a diverse view on the subject. According to Creswell (2012) developing strong validation in a study includes the use of various data sources and viewpoints in a process known as triangulation.

Through triangulation validity of the study generated, as was not only secondary data presented but also firsthand expertise from the directors during the interview process. The theme that emerges from a trustworthiness strategy is dependability because if a study is to be trusted, it must possess high levels of dependability and credibility. For this reason, it was crucial that whatever step or process that was being worked on during the study, it had to be performed the same ever time. Such strategies were critical in creating trustworthiness as well as maintaining it throughout the entire study.

Credibility

As mentioned earlier one of the strategies utilized to generate not only validity but credibility, was to select data from trustworthy sources such as scholarly journals and from participants who possess expert knowledge over the subject matter. According to Elo et al. (2014) creating trustworthiness in a study commences with selecting the best data as well as the method that will aid in collecting this data. Building upon this

principle was why the 13 directors were chosen as the interviewees for this study because their opinions and responses were based on their firsthand knowledge and expertise in the field. The participants were given time to ask questions and review the study, which is known as the member check (Ravitch & Carl, 2015). This concept helped to build credibility because it allows the researcher to determine if the participants were relevant to the study and if their knowledge was credible and was an asset to the study. Furthermore, Ravitch and Carl (2015) asserted that maintaining a research design and executing is a manner in which a researcher can achieve credibility. The research design for the study ensured credibility in that for the study to be completed it required expert knowledge and scholarly journals. Also, the research helped to keep the study focused thus increasing the credibility of the study. Addressing questions regarding policies concerning elder abuse, made it essential to select the 13 planning and service area directors as they have access to such information. Choosing such sources helped to build credibility in the mind of the reader. The combination of first-hand knowledge and scholarly journals helped to convey the credibility of the study to the reader and members of the academic community.

Transferability

The concept of transferability was interpreted as the study's ability to be used in other types of research whether it be particular concepts or methodology of the study that is transferable (Ravitch & Carl, 2015). Elder abuse is a social issue that in this particular study was not subjugated to a particular area but rather was examined from a statewide perspective, which for the intent and purposes of this study was the state of Illinois. The

13 planning and service area directors was a sample size that represented the entire state of Illinois, which allows the study to be transferable to any research dealing with a social issue. As a qualitative study, which was established in Chapter One of this as being the best method in extracting firsthand experience concerning a social problem (Creswell, 2012). The combination of secondary data and personal encounter allows for multiple perspectives which may be used in studies that seek a more balanced view and thus can generate a more likely conclusion to an issue being researched. Whether a study wishes to build this current study, the type of data collected and the research design that was implemented can help to create a good foundation from which to build. Elements such as the type of data analysis could be transferable to any study that has sensitive data to research and analyze without having compromise the security of the participants and the organizations. Many social issues require expert knowledge and first-hand experiences with the subject manner; therefore, many elements of this study are transferable because of previously mentions concepts such as the research design, data analysis strategy and the combination of the secondary data and firsthand knowledge.

Dependability

The concept of dependability refers to the data collected being able to support the conclusions conveyed by the study as well as answering the research questions (Korstjens & Moser, 2017). The data collected in this study and how it was coded and analyzed was hinged on the research questions, which was the driving factor as to how the data would be selected and applied to the study. The strategies created in Chapter Three as to how data would be collected, how participants would be chosen and how the results would be

analyzed, was conducted with great extensive care so as to maintain stability and direction, which is critical if a study is to be successful. The study argued the rationale for selecting the qualitative research design, the methods in which the data was to be collected and analyzed, aided in its creation of dependability because each concept had to be fully supported and not be a random choice. The precision for why each element of the study was chosen and implemented was done to ensure the overall trustworthiness of the study but also the dependability of the study. The results of the study were a reflection of the choices made in the study in terms of the structure and methodology. The data received from the directors and secondary data sources were persistent with the research design, which was chosen for its ability to gain personal data regarding social issues, which is keeping with a study being dependable.

Confirmability

Confirmability known as subjective is crucial for a study if it is to be trustworthy and free of potential issues such as bias (Williams & Morrow, 2009). The results of the study were reported without any bias or manipulation. The strategy in Chapter Three that addressed the potential of bias was executed so that there was no manipulation of the data. Manipulation in the sense of trying to force the data to answer the research questions in a manner that validates the study. Open communication was kept with the interviewees so that they were aware of the purpose of the study and why it was being conducted as well as the role they were playing in the study. The results were downloaded from the emails and secure on an external high drive. The participants had equal time and the same interview questions so as to ensure the integrity of the study. The

data was reported as is and was not hindered to accommodate a narrative. Being that the interviews were conducted through email, there was no chance for any influence to be placed on how the interviewee decided to answer the questionnaire thus eliminating any researcher influence. Participants were provided time to review their responses and email them when they felt they were correct. Every type of secondary data was viewed and used in the study regardless if the data supported or refuted the study. All of these actions were executed according to the strategies created in Chapter Three. The approach would prevent bias and create a study based on subjectivity due to its strict conformity to the research design.

Results

This section organized and structured the results by the specific research question to make the navigation of the results simple and easy to comprehend. The results include table and figures that will convey the data in a manner that illustrates a crucial idea or themes that directly targets the research question. Addressing the research question through the data collected is the purpose of this section.

Research Question 1

RQ1: How do the 13 planning and service areas directors in the state of Illinois evaluate the current policies related to elderly abuse? This section of the chapter focused on the results from the interviews conducted with the 13 planning and service area directors from the State of Illinois. The data collected reflected the personal experiences that were derived from the 13 directors. As mentioned earlier in the chapter not all of the 13 planning and service area directors responded. The breakdown of the participation

between the 13 directors in the study were as follows: five directors did not respond, five directors signed the consent form and participated, while the remaining three directors responded but did not sign the consent form. The number of responses was more than half of the total number of directors, which allowed for plenty of useful data; however, as a compensation for the five directors that did not respond, the use of secondary data was utilized.

No Response

The five directors that did not respond were Director 1A, Director 4D, Director 5E, Director 10J, and Director 12L. The five directors that did not respond were all contacted three times, the first time being on January 11, 2019, January 15, and the final time January 25th. All of the directors were contacted on those three dates unless a response was given prior to the last two contact dates. Director 1A is responsible for Organization 1A which assists Agency 1, Agency 2, Agency 3, and Agency 4. Director 4D is responsible for Organization 4D, which assists Agency 13. Director 5E is responsible for Organization 5E, which in turn helps Agency 15, Agency 16, Agency 17, Agency 18, Agency 19, Agency 20, and Agency 21. Director 10J manages Organization10J, which has Agency29 as its designated agency. Finally, Director12L manages Organization 12L, which has Agency 31, Agency 32, Agency 33, Agency 34, and Agency 35 under its jurisdiction. The five directors that did not respond and participate in the study have a combined total of eighteen agencies under their respective jurisdiction out of the 45 total agencies in the state of Illinois.

Response/No Consent

The three directors that provided a short response but did not sign the consent form were Director 3C, Director 6F, and Director 7G. Director 3D manages Organization 3C and has Agency 12 under its jurisdiction. Director 6F manages Organization 6F, which helps Agency 22. Director 7G provides leadership in Organization 7G, which then helps to assist Agency 23, Agency 24, Agency 26, and Agency 27. Many of the responses reflected a lack of experience and leadership. The ability to assist was very limited due to inexperience and time constraints (Director 6F). Assisting or following up in investigations conducted by the agencies is not performed (Director 3C). The theme that had resonated based on these three responses was that of ineffectiveness because of the common codes that were observed in the responses such as inexperience and lack of effective leadership. The codes lack of effective leadership and inexperience were visible in the sense that there is no follow up by the director, which may have had the effect of helping a director to understand better how elder abuse is being handled by its constituents, while inexperience was seen in the amount of time the director has been in their current position. As far as polices there was nothing that could be concluded, due to the short responses, which did not address any particular policies.

Five Participants

The five participants of this interview were Director 2B, Director 8H, Director 9I, Director 11K, and Director 13M. Director 2B operates from Organization 2B, which oversees Agency 5, Agency 6, Agency 7, Agency 8, Agency 9, Agency 10, and Agency 11. Director 8H is headquartered in Organization 8H and serves Agency 28. Director 9I

resides and operates from Organization 9I, which works alongside Agency 29. Director

11K operates from Organization 11K, which works along Agency 30. Director 13M

manages Organization 13M and gives assistance to Agency 36, Agency 37, Agency 38,

Agency 39, Agency 40, Agency 41, Agency 42, Agency 43, Agency 44, and Agency 45.

These directors serve twenty out of the total of 45 agencies in the State of Illinois. The

average experience level among the participants in terms of years serving as the director

was around twelve percent. This average level of experience was essential in that it

guaranteed a reliable source of information that was not only personal experiences but

technical information as well, which add to the relevance and trustworthiness of the

study.

The interview questionnaire (Appendix B) consisted of twenty questions, which

were designed to acquire the personal experiences of the directors. While analyzing the

responses from the participants, the following themes had emerged. The first theme that

had developed from the data was administrative. One of the obvious themes that was

uncovered during the data analysis process as mentioned was administrative. The five

codes that acted as a commonality between the directors as it relates to theme of

administrative were policy implementation, hiring of staff, creating reports, program

reviews, and the providing of assistance. Each of these codes were set of actions that

were performed by each of the participants as they completed their daily tasks as director.

This theme revealed the type of workload that is required of the directors, while at the

same time the directors must ensure that caseworkers are properly responding to cases of

elder abuse.

The second theme that was evident from the responses was the theme of restriction, which is based on the guidelines set by the current policies dictating the response and investigation of suspected cases of elder abuse. The codes that were associated with the theme of restriction were the adult protective service protocols, social isolation, consent, and elder abuse criteria. The theme of restriction showed essential codes that influenced the manner in which cases of elder are responded or investigated. These codes have their origins in the current policies that govern the standards in which elder abuse is handled in the state of Illinois. According to Director 11K investigations related to elder abuse may only be conducted through the protocols established by the adult protective services. One of these protocols includes the criteria of what is considered abuse as well as the age of the victim. Only individuals that are sixty years of age or older and meet the requirements of what is considered abuse are assisted (Director 2B). Being socially isolated plays a role on what type of cases are investigated (Director 8H). The theme of restriction revealed that not just any case can be investigated and that it must follow specific criteria.

A third theme that had emerged from the interview was the theme of shortcoming, which was a theme reflected in the responses of all the participants. The codes that related to the theme of shortcoming were as follows: staffing, turnover, local networks, and policies which precisely conveyed the theme of shortcoming, an issue that many directors iterated in their responses to the questionnaire. Director 2B stated that policies concerning the screening process needed to be changed so that more potential cases could be investigated. Furthermore, Director 11K iterated that the current staff is being pushed

thin, which limits the number of cases investigated. Director 9I stated that increase in funding as well as policy regarding the amount of time allowed for investigations should be changed. However, Director 8H noted that there needs to be less turnover as it plays a significant role in daily tasks and the overall operation. Director 13M emphasize that local networks such as law enforcement, state's attorneys, and health care providers must go further because of the limitations on what type of assistance may be given to victims. The codes created based on the theme of shortcoming revealed a need for change in the manner in which cases of elder abuse is investigated and viewed. The codes also showed that the current policies must be amended in a manner that allows for higher productivity and ultimately a more effective response to elder abuse.

The final theme that was uncovered from the results of the interview was the theme of improvement, which had incorporated personal opinions from the participants as to how to better respond, investigate and assist in suspected cases of elder abuse. The final major theme that was present in the interviews, was that of improvement, which was reflected in the following codes such as monitoring for care providers, training, enhanced protections, and confidentiality. Director 2B stated that professionals need to be better trained on reporting of cases of elder abuse as there are many underreported cases of elder abuse. Director 13M suggested a need for so-called enhance protection from lawsuits, which adversely influences the response to incidents of elder abuse. Moreover, Director 8H recommended the need for better policies regarding the issue of confidentiality as well as better relationships with providers through better monitoring to ensure effectiveness. Director 11K suggested better training to increase awareness

services. Finally, Director 9I stated that better confidentiality policies because many times it is a family member that is the cause of the abuse. These codes again reinforced the idea that there must be a change to the current policies if every potential case of elder abuse is to be investigated.

The themes that originated from the interview showed the reality of elder abuse as well as revealing that there is plenty of room for improvement in policies that may better improve the response to elder abuse. Most of the participants felt there should be a change in policy as to how cases of abuse are handled and investigated. However, Director 9I thought that although there are certain elements that could be improved, felt that the overall the current policies were comprehensive enough.

Adult Protective Services

As established earlier in the chapter only five directors participated, three directors responded but did not sign the consent form, and finally, the remaining five directors did not respond, which is why secondary data was needed. Case studies concerning the Adult Protective Services were used to fill the gap left by the directors who did not respond or participated in the study. According to the State of Illinois Department on Aging (2004) cases of abuse were only reported if a caseworker believed the victim was not able to report the abuse, as mandated by a limited mandatory reporting policy. Moreover, the crimes against seniors program were created to help fight elder abuse during the 2005 fiscal year (State of Illinois Department on Aging, 2005). Further actions were taken to improve programs through the self-neglect survey, which were conducted (State of Illinois Department on Aging, 2006). The Elder Abuse and

Neglect Act was signed to establish a committee to better protect the right of the elderly

(State of Illinois Department on Aging, 2007). According to the State of Illinois

Department on Aging (2008) the elder abuse and neglect act was improved to help better

investigate suspicious deaths of the elderly. Funding and toolkits were updated as part of

the effort to increase awareness concerning elder abuse (State of Illinois Department on

Aging, 2009). According to the State of Illinois Department on Aging (2010), the elder

abuse and neglect act was again amended to allow regional areas to create their review

committees. The Public Act 96-1103 was enacted to help train financial institutions on

how to detect financial exploitation (State of Illinois Department on Aging, 2011).

During the 2012 fiscal year, financial training was increased dramatically due to the

Public Act 96-1103 (State of Illinois Department on Aging, 2012). The elder abuse and

neglect act were converted to the adult protective services act to better respond to cases

of elder abuse (State of Illinois Department on Aging, 2013). The Adult Protective

Service Act was further amended to establish close relationships between the Department

on Aging and the Department on Human Services (State of Illinois Department on Aging,

2014). In 2015 the Adult Protective Service Act was further changed to allow immediate

notification of law enforcement during a suspected case of elder abuse (State of Illinois

Department on Aging, 2015).

Moreover, the department on aging collaborated with domestic violence

advocates to complete referrals for cases of elder abuse (State of Illinois Department on

Aging, 2016). According to the State of Illinois Department on Aging (2017), the Illinois

Department on Aging developed further partnerships with mental health, human health

services, and rehabilitation services to better respond to elder abuse. The policies that were designed to address elder abuse has changed drastically and are the current policies by which govern the 13 planning and service area directors, who then enforce them on the 45 agencies throughout the state of Illinois.

Research Question 2

RQ2: What impact does funding have on the measurable outcomes of the 13 planning and service areas and the 45 provider agencies? This section focused on the funding at the federal, state and community level from the state of Illinois.

Federal Level

In addressing the issue of funding, it was essential to adequately address the streams of income or funding received by the 13 planning and service area and the 45 provider agencies. The federal level of funding was discussed first as this is the level where funding and policy tended to commence before leading into the state level and local levels. The primary administration at the federal level that is responsible for dispensing funds is the Administration for Community Living (ACL), which was created by the United States Department of Health and Human Services (Administration for Community Living, 2018d). Furthermore, the ACL was designed to help the elderly and disable (Administration for Community Living, 2018c). Under the jurisdiction of the ACL is the Administration on Aging (Administration for Community Living, 2018g). According to the Administration of Community Living (2018b), the Administration on Aging is given the responsibility to carry out the provisions of the Older American Act, which empowers the federal government to distribute funds for the elderly.

Administration on Aging/Administration for Community Living

The following data details the distribution of funds by the Administration on

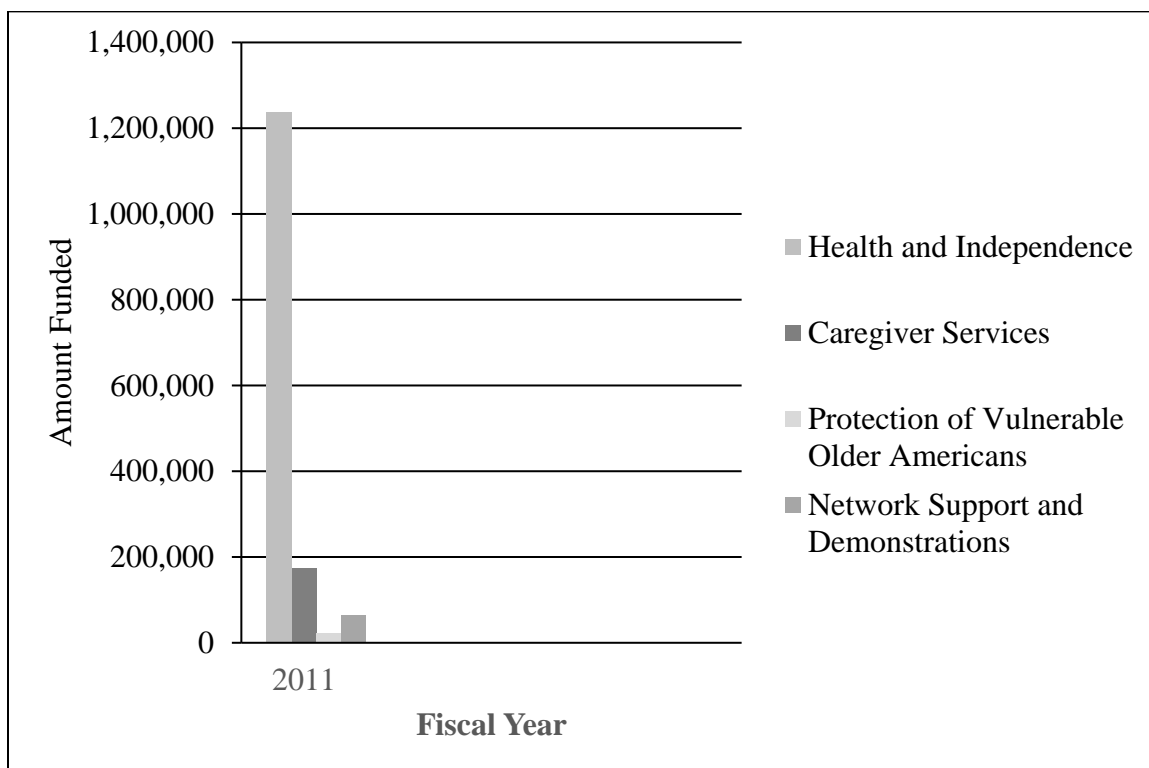Aging towards programs and services that target elder abuse type services.

Figure 1. Funding for Administration on Aging, Fiscal Year 2011. Retrieved from
Administration on Aging, *Annual Reports.*

Figure 1 shows the lack of funding being distributed for protection of vulnerable

older americans as only $21,883 was designated in 2011; while the health and

independence programs received $1,236,556 a significant difference of $1,214,673

(Administration on Aging, 2011).

In response to the growing elderly population, for the 2012 fiscal year, the

Administration on Aging increased its budget to meet the increasing demand
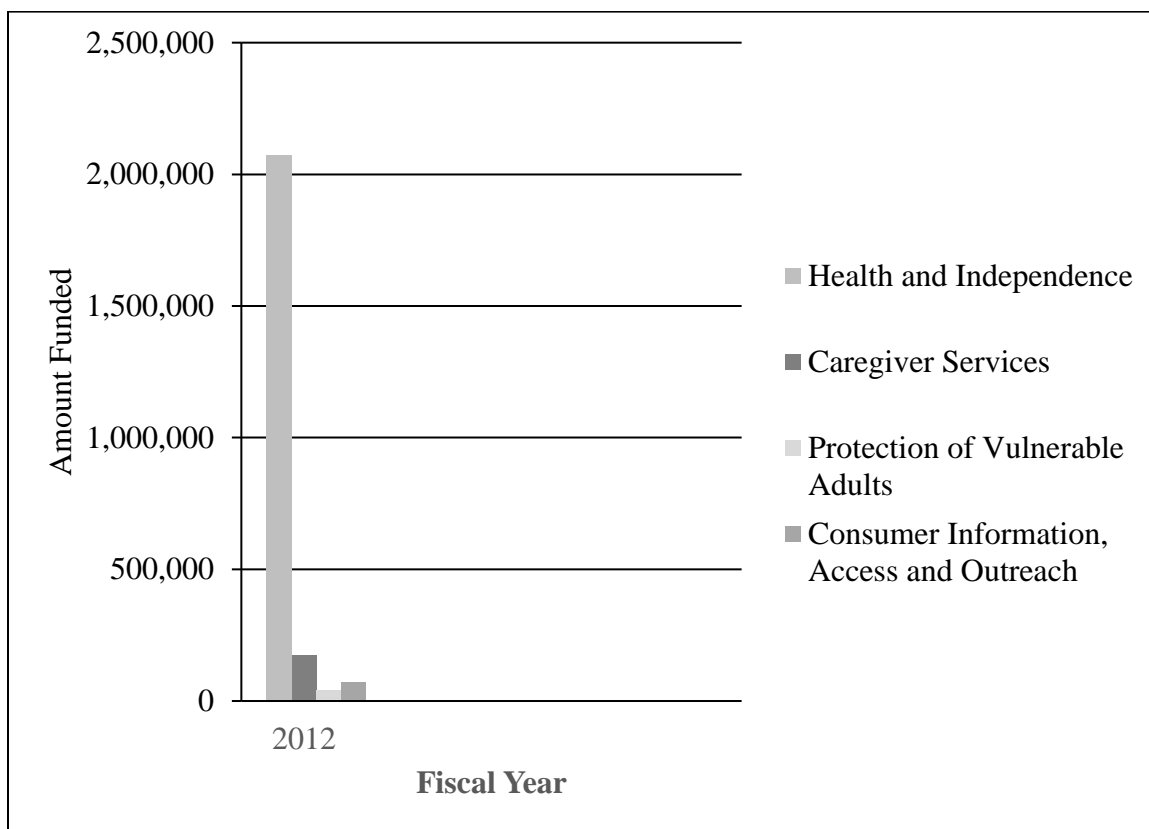
(Administration on Aging, 2012).

Figure 2. Funding for Administration on Aging, Fiscal Year 2012. Retrieved from Administration on Aging, *Annual Reports.*

Figure 2 reveals an increase of $16,855 in 2012; however, when compared to

other programs and services, the amount donated to the protection of vulnerable adults is

still small. The health and independence programs received $2,070,181 which was a

significant difference of $2,053,326 in comparison to the funding received by the

protection of vulnerable adult programs (Administration on Aging, 2012).

In an effort to help the elderly maintain their independence, the Administration on Aging

requested a higher budget but the actual amount was quite the opposite (Administration
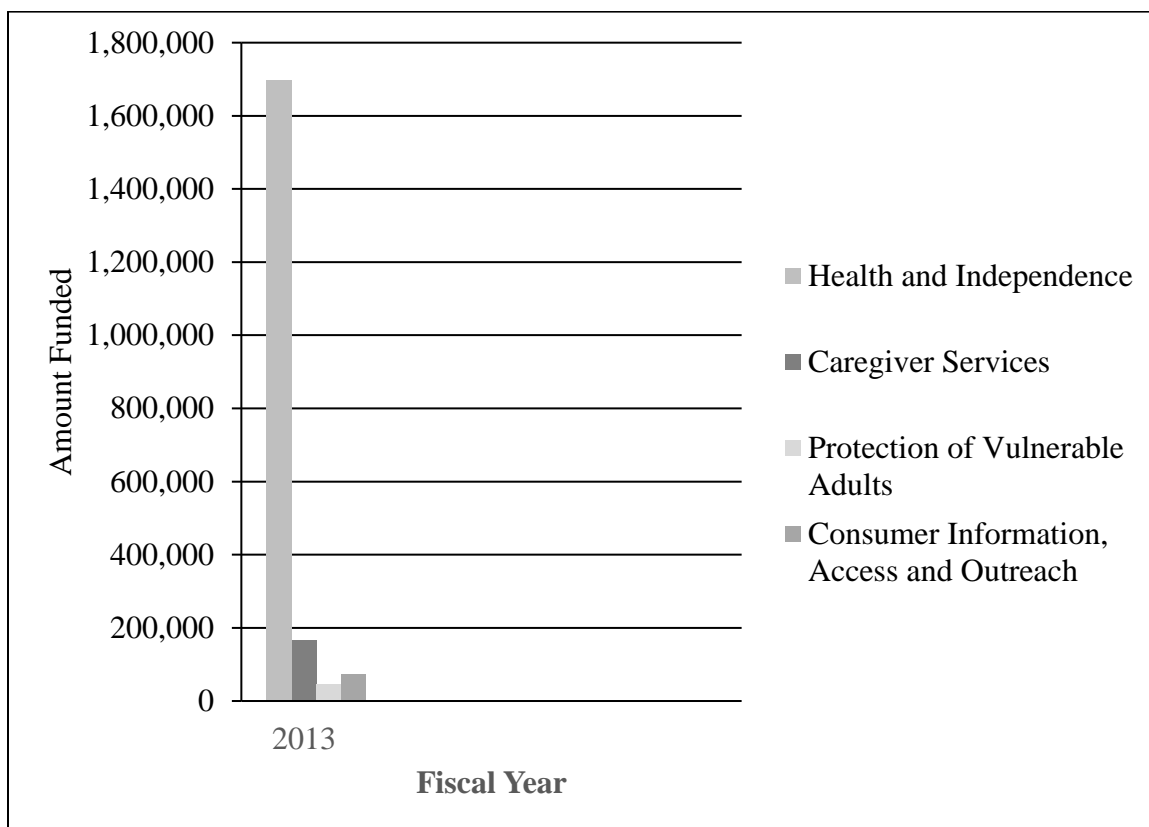
on Aging, 2013).

Figure 3. Funding for Administration on Aging, Fiscal Year 2013. Retrieved from Administration on Aging, *Annual Reports.*

In Figure 3 the Administration on Aging for its 2013 budget increased funding for the protection of vulnerable adults programs by $7,259 but again is a small amount of funding when compared to the fund donated to health and independence programs and services (Administration on Aging, 2013).

Due to national fiscal challenges faced, the Administration for Community Living fell short in funding for programs received by the elderly, which limited the level of elderly individuals being served (Administration for Community Living, 2014).
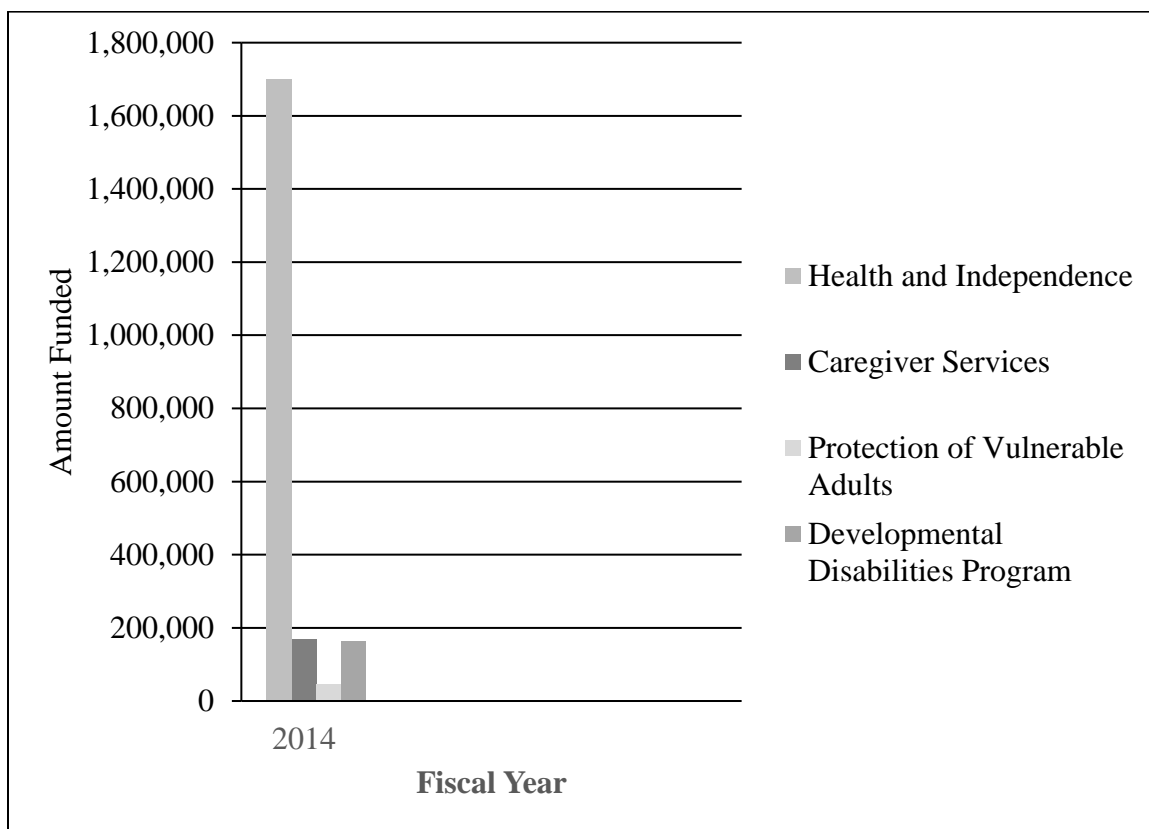
Figure 4. Funding for Administration for Community Living, Fiscal Year 2014. Retrieved from Administration for Community Living, *Annual Reports.*

Figure 4 reveals a small increase of only $217 to the total funding concerning the protection of vulnerable adults programs and services from the previous year. The data again showed the dismal amount being funded for programs that would help individuals that suffer from elder abuse. The health and independence programs received $1,698,205, a decrease from the previous year but still is a significant difference of $1,651,991 when compared to the protection of vulnerable adult programs (Administration for Community Living, 2014).

In an effort to combat the federal budgetary issue, the Administration for Community Living formed a budget to allow its core programs to remain operational,

while other programs encountered decreases in funding or were cut altogether

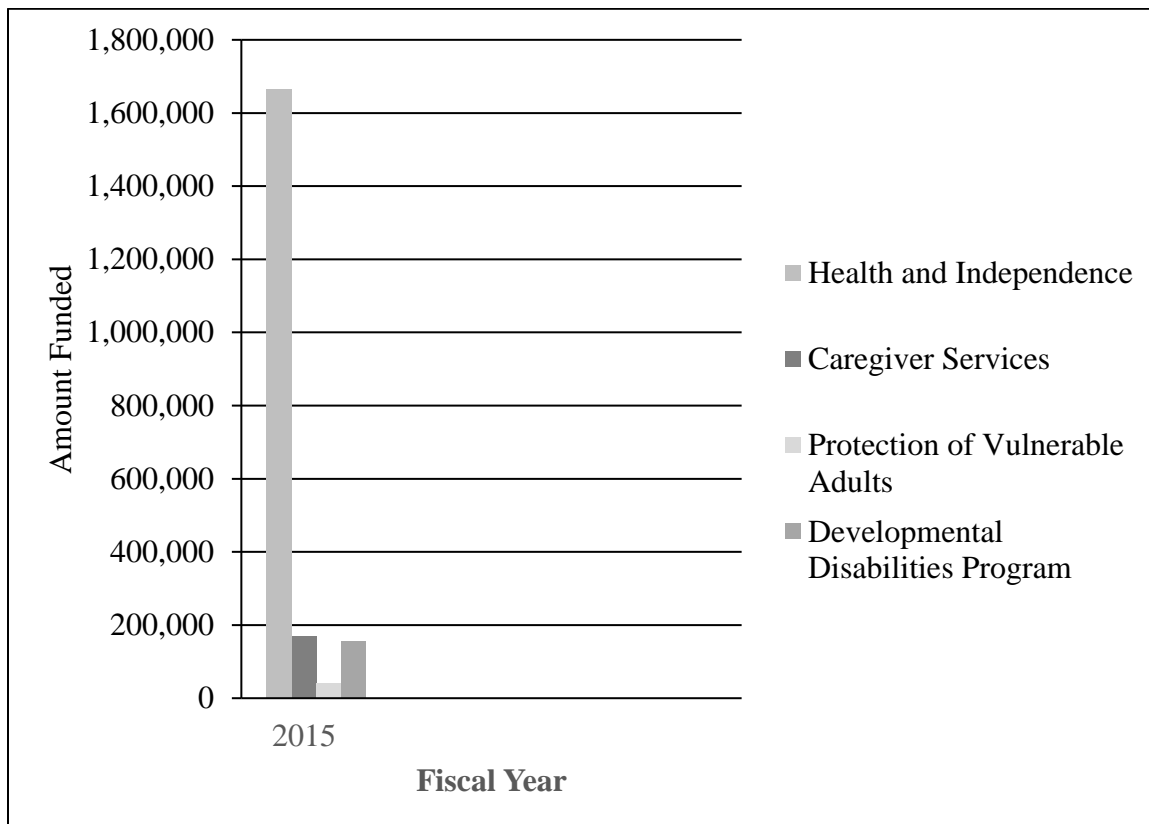(Administration for Community Living, 2015).

Figure 5. Funding for Administration for Community Living, Fiscal Year 2015.
Retrieved from Administration for Community Living, *Annual Reports.*

Figure 5 revealed a decrease in funding for the protection of vulnerable adults

programs and services from the amount that was received in the previous year's budget,

which was a total reduction of $6,182 decrease in total funding. The health and

independence programs also saw a decrease in funding but still received a significant

amount of funding which totaled $1,663,219 in comparison to the protection of

vulnerable adult programs (Administration for Community Living, 2015).

In an effort to develop its programs regarding the adult protective services, an
increase in funding was redirected for such programs for the 2016 fiscal year
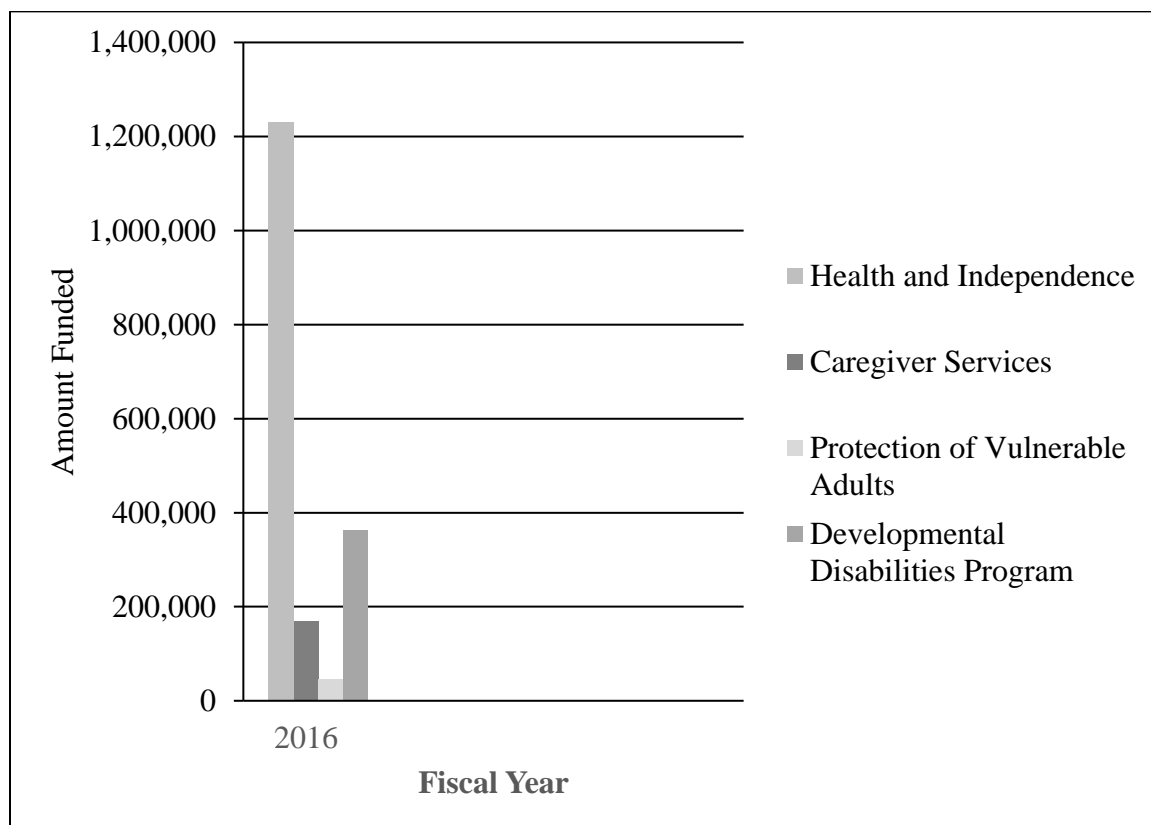(Administration for Community Living, 2016).

Figure 6. Funding for Administration for Community Living, Fiscal Year 2016.
Retrieved from Administration for Community Living, *Annual Reports.*

Figure 6 showed a $6,120 increase in funding from the previous year for the
protection of vulnerable adults programs and services. The increase in funding was not as
significant of an improvement when compared to the increase in funding received by the
developmental and disabilities programs, which saw funding totaling $362,110, an
increase of $206,851 (Administration for Community Living, 2016).

The Administration for Community Living requested two million in further funding for the adult protective services, but the total funding was nowhere near the level requested (Administration for Community Living, 2017).
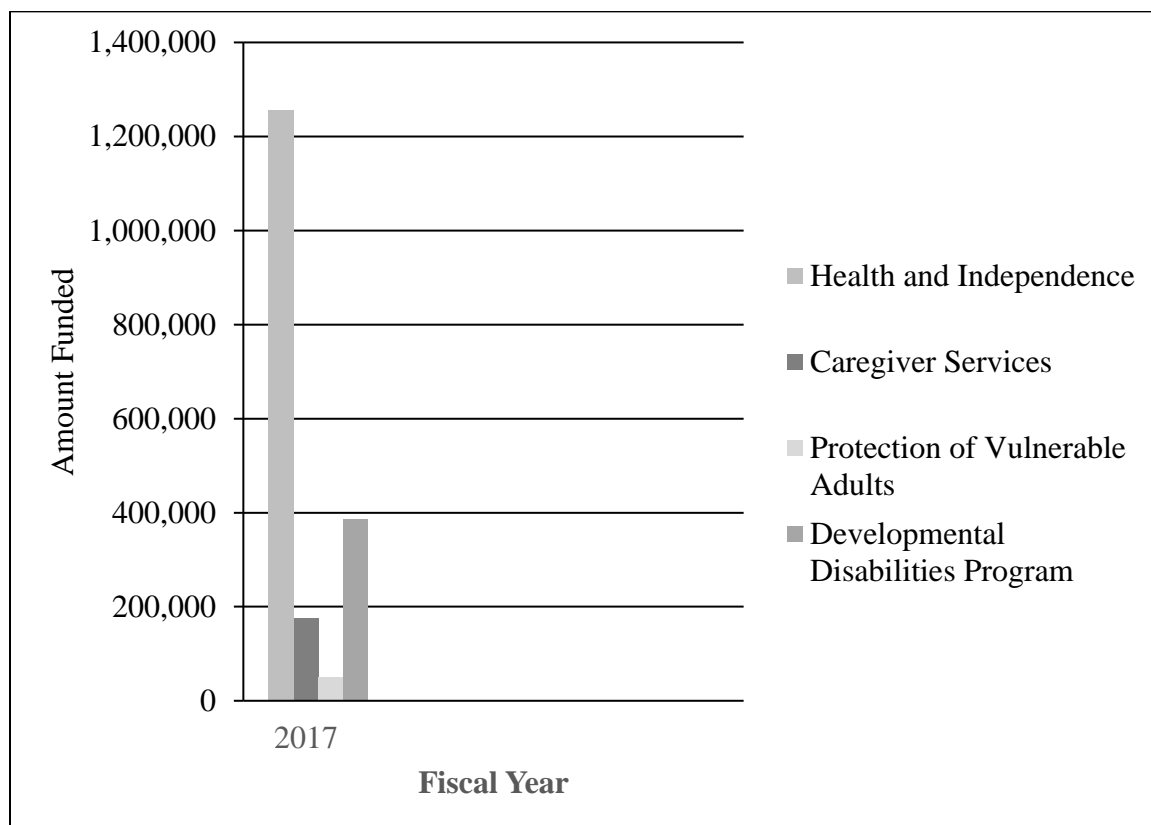

Figure 7. Funding for Administration for Community Living, Fiscal Year 2017. Retrieved from Administration for Community Living, *Annual Reports.*

Figure 7 showed funding towards the protection of vulnerable adults increased by $4,000 from the previous year. Funding for the other program services saw a more significant increase in their funding from the Administration for Community Living. The protection of vulnerable adult programs and services receiving the smallest amount of funding with $50,152 when compared to the other types of programs such as the

developmental and disabilities program, which received $385,337 in total funding

(Administration for Community Living, 2017).

     To preserve its core mission on helping the elderly population maintain its

independence, the Administration for Community Living devoted funding for programs

that supported its mission and vison (Administration for Community Living, 2018a).
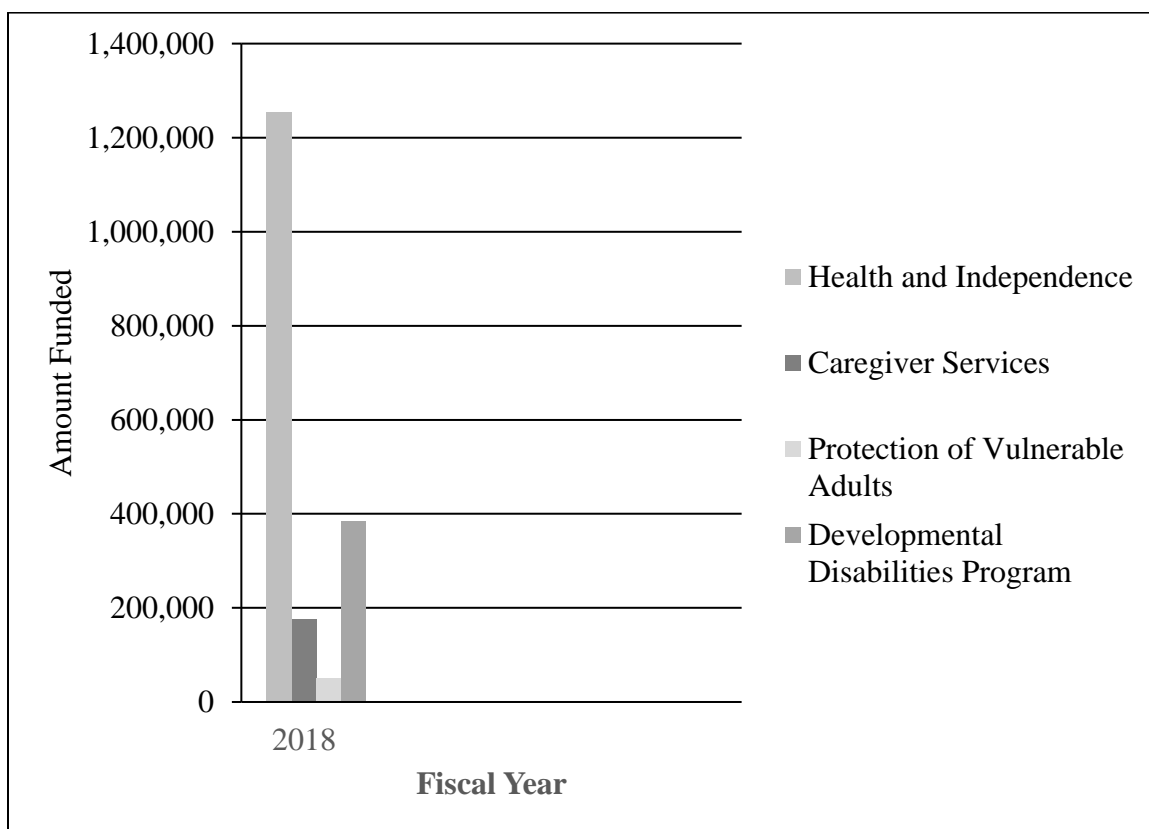
Figure 8. Funding for Administration for Community Living, Fiscal Year 2018. Retrieved from Administration for Community Living, *Annual Reports.*

     Figure 8 revealed only a $318 increase in the funding received by the protection

of vulnerable adult programs. However, each program saw small decreases in its funding

except the protection of vulnerable adults. Programs such as the developmental

disabilities program only saw an insignificant decrease of $733, when compared to the

total funding received by the protection of vulnerable adult programs (Administration for Community Living, 2018a).

The data observed in the figures indicated the small amount of funding that is given to programs and services that respond to elder abuse from the Administration for Community Living. The trend that was observed was an inconsistent amount of funding, where funding was either increased or decreased, while it is true that funding increased within the last couple of years, the amount of the increase it very insignificant for it to have any impact.

Title III/Title VII

Another source of federal funding that is received by the 13 planning and service areas and the 45 service provider agencies is the Older American Act, which has created mandatory grant allocation. These mandatory grants are completed under Title III of the Older American Act as well as Title VII (Administration for Community Living, 2018f). Title III covers support services that are offered to the elderly, services such as caregiver services, nutrition services, disease prevention services, and supportive senior center programs (United States Department of Health and Human Services, Administration for Community Living, 2013a). According to United States Department of Health and Human Services, Administration for Community Living (2004a) $46,156,979 was granted to the state of Illinois under Title III. In 2005 the Title III grant allocated $46,337,594 to the state of Illinois to cover support services (United States Department of Health and Human Services, Administration for Community Living, 2005a). The grant allocated in 2005 was an increase of $177,615 from the previous year. However, 2006

saw a decrease of $184,588 in grant money as only $46,153,006 was given to the state of Illinois under the Title III mandatory grant (United States Department of Health and Human Services, Administration for Community Living, 2006a). In 2007, there was an increase of $300,131 with the mandatory grant totaling $46,453,137 (United States Department of Health and Human Services, Administration for Community Living, 2007a). Again there was a decrease in the amount of the grant given to the state of Illinois, with the total amount being granted $46,387,174, which is a decrease of 65,963 from the previous year (United States Department of Health and Human Services, Administration for Community Living, 2008a). 2009 saw a significant increase in the amount of funding granted to the state of Illinois under Title III with the total amount equaling $47,196,678, an $809,504 increase from last year (United States Department of Health and Human Services, Administration for Community Living, 2009a). Moreover, the grant allocated to the state of Illinois saw a decrease of $103,086 in the amount of the grant for a total of $47,093,592 (United States Department of Health and Human Services, Administration for Community Living, 2010a). According to the United States Department of Health and Human Services, Administration for Community Living (2011a), the grant allocated to the state of Illinois during 2011 saw a decrease of $239185 for a total of $46,854,407. The Title III grant for the State of Illinois saw a reduction of $90,363 with the grant totaling $46,764,044 (United States Department of Health and Human Services, Administration for Community Living, 2012a). During the 2013 fiscal year, the amount granted to the State of Illinois saw a substantial decrease of $1,020,570 for a total grant of $45,743,474 (United States Department of Health and Human

Services, Administration for Community Living, 2013b). In 2014, the mandatory grant

increased by $321,250 for the State of Illinois with a grand total of $46,064,724 (United

States Department of Health and Human Services, Administration for Community

Living, 2014a). The grant for 2015 saw a decrease of $70,701 as the total funds granted

to the state of Illinois dropped to $45,994,023 (United States Department of Health and

Human Services, Administration for Community Living, 2015a). The 2016 grant figures

saw an increase of $409,999 for the State of Illinois as the total grant fund given totaled

$46,404,022 (United States Department of Health and Human Services, Administration

for Community Living, 2016a). Finally, in 2017 the amount of grant money given to the

State of Illinois decreased by $446,728 with a total grant received of $45,957,294 (United

States Department of Health and Human Services, Administration for Community

Living, 2017a).

The trend that was observed from the Title III mandatory grant money given to

the State of Illinois was that it fluctuated from year to year with steady decreases as well

as increases. As noted the grant money from Title III is expressly given to fund support

services for the elderly. However, as established earlier Title VII is grant money given to

the purposes of programs and services dealing with situations such as elder abuse.

In the state of Illinois, there is a need to help improve the benefits received by the

elderly as well as protecting their rights to remain independent and maintain their dignity

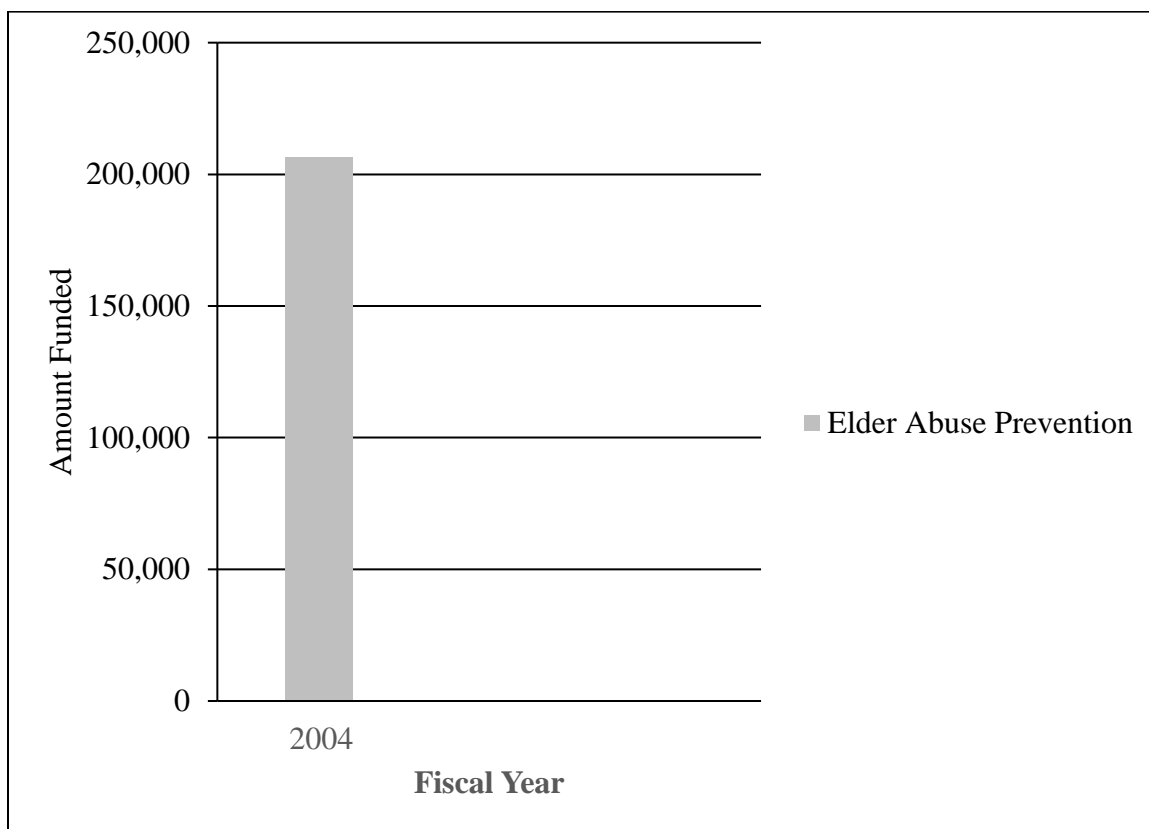(Illinois Department on Aging, 2007).

Figure 9. Funding for Elder Abuse Prevention, Fiscal Year 2004. Retrieved from United States Department of Health and Human Services, Administration for Community Living, *Annual Reports.*

Figure 9 shows that only $206,389 was given to the State of Illinois for elder abuse prevention services and programs in 2004 (United States Department of Health and Human Services, Administration for Community Living, 2004b).

The elderly population in the state of Illinois is increasing steadily and appears to be headed towards a twenty-four percent representation of the total population in the state of Illinois within the next decade (Illinois Department on Aging, 2008). The increase in elderly population will also increase the need for services, which can only exist if there is funding for the services.

Figure 10. Funding for Elder Abuse Prevention, Fiscal Year 2005. Retrieved from United States Department of Health and Human Services, Administration for Community Living, *Annual Reports.*

Figure 10 revealed a decrease in the amount granted by Title VII for elder abuse prevention programs and services with a total amount allocated of $203,990 a $2,399 reduction from the previous year (United States Department of Health and Human Services, Administration for Community Living, 2005b).

A primary goal is to reduce the stress and strain placed on family care givers by the expansion of other elderly related programs in the state of Illinois (Illinois Department on Aging, 2010). In order to reduce the stress on family care givers, there

will need to be funding for any program that is created to relieve the stress imposed on
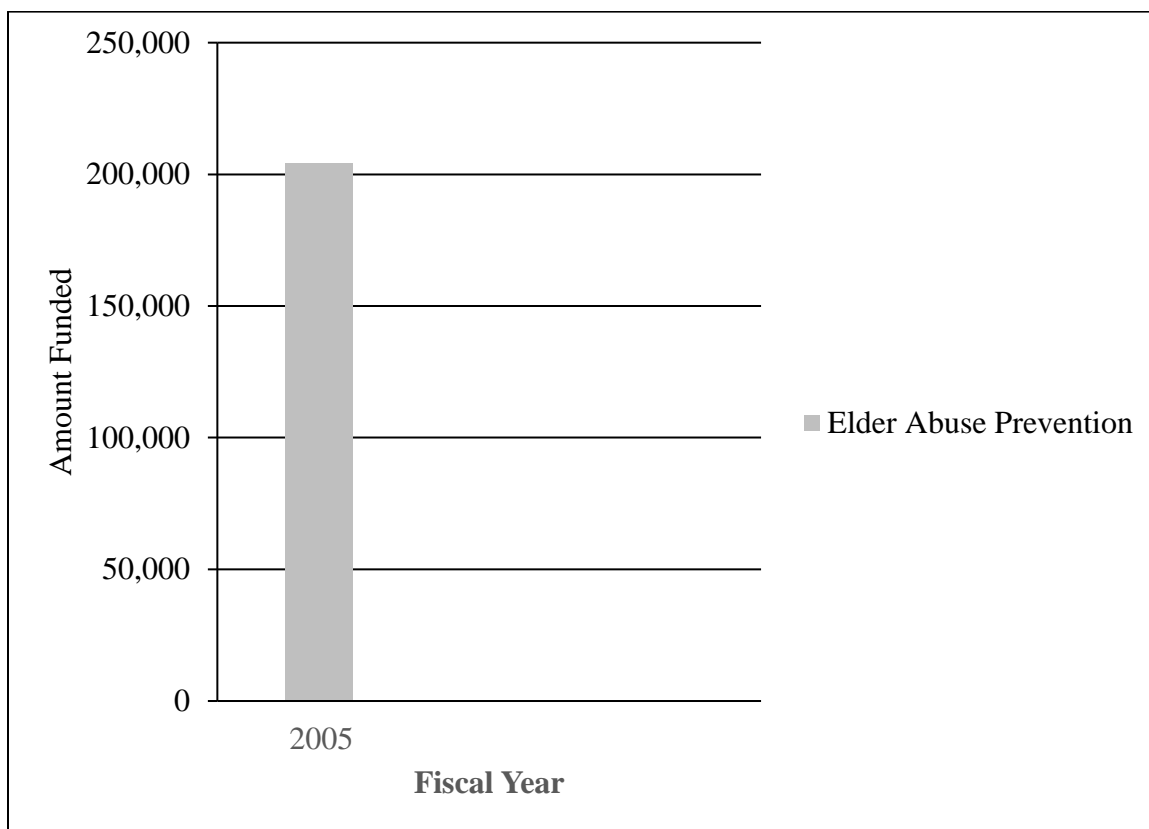
family care givers.

Figure 11. Funding for Elder Abuse Prevention, Fiscal Year 2006. Retrieved from United States Department of Health and Human Services, Administration for Community Living, *Annual Reports.*

Figure 11 showed another decrease in the grant allocation to the State of Illinois

for elder abuse prevention for $179, which left a total appropriation of $203,811 for the

2006 year (United States Department of Health and Human Services, Administration for

Community Living, 2006b).

The two most important objectives concerning the elderly programs in the state of

Illinois, is to maintain sustainability and provide delivery of those services to each elderly

in need throughout the state (State of Illinois, 2016). In order to sustain programs and

delivery of those programs, funding must be given if the program is to have success.
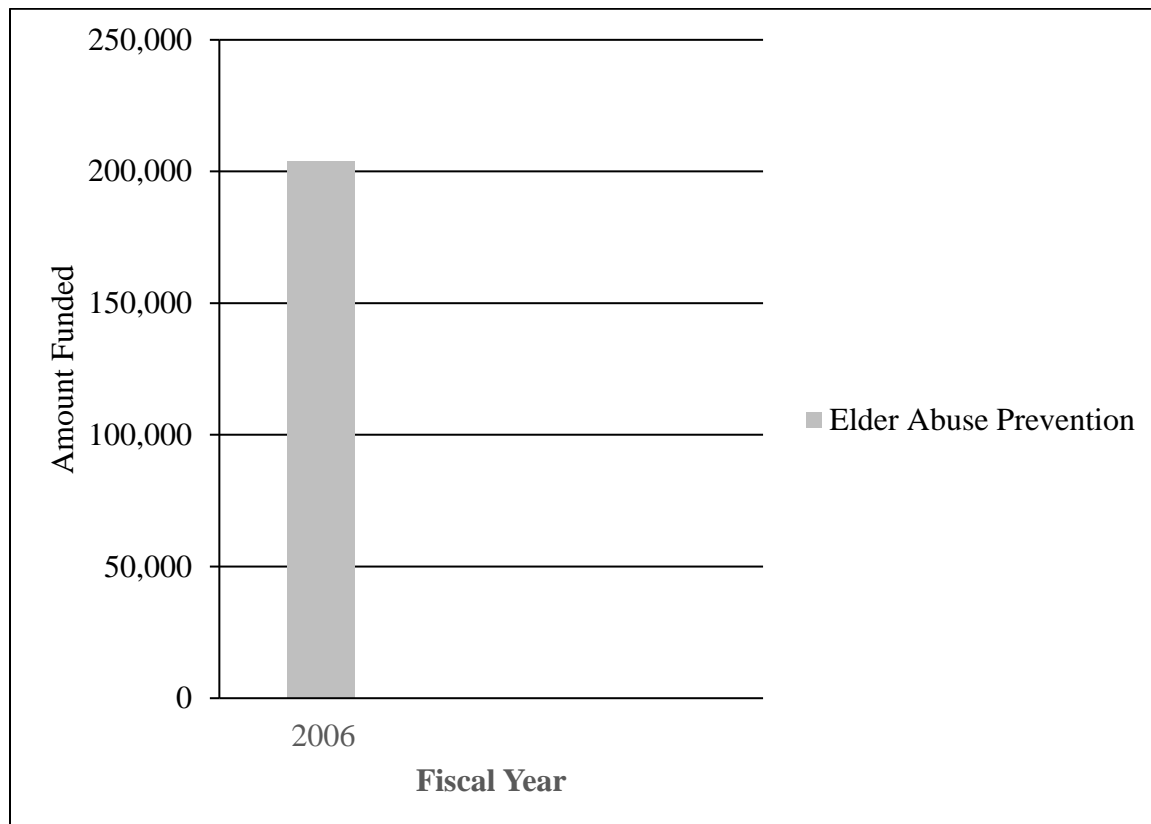

Figure 12. Funding for Elder Abuse Prevention, Fiscal Year 2007. Retrieved from United States Department of Health and Human Services, Administration for Community Living, *Annual Reports.*

Figure 12 revealed for a third straight year a decrease in the amount of grant

funding the State of Illinois received for elder abuse prevention with a reduction of $764

for a total grant allocation of $203,047 for the 2007 year (United States Department of

Health and Human Services, Administration for Community Living, 2007b).

Due to an increase for a need for alternative solutions besides nursing home care;

the state of Illinois hopes to deliver better long-term care programs but has struggled due

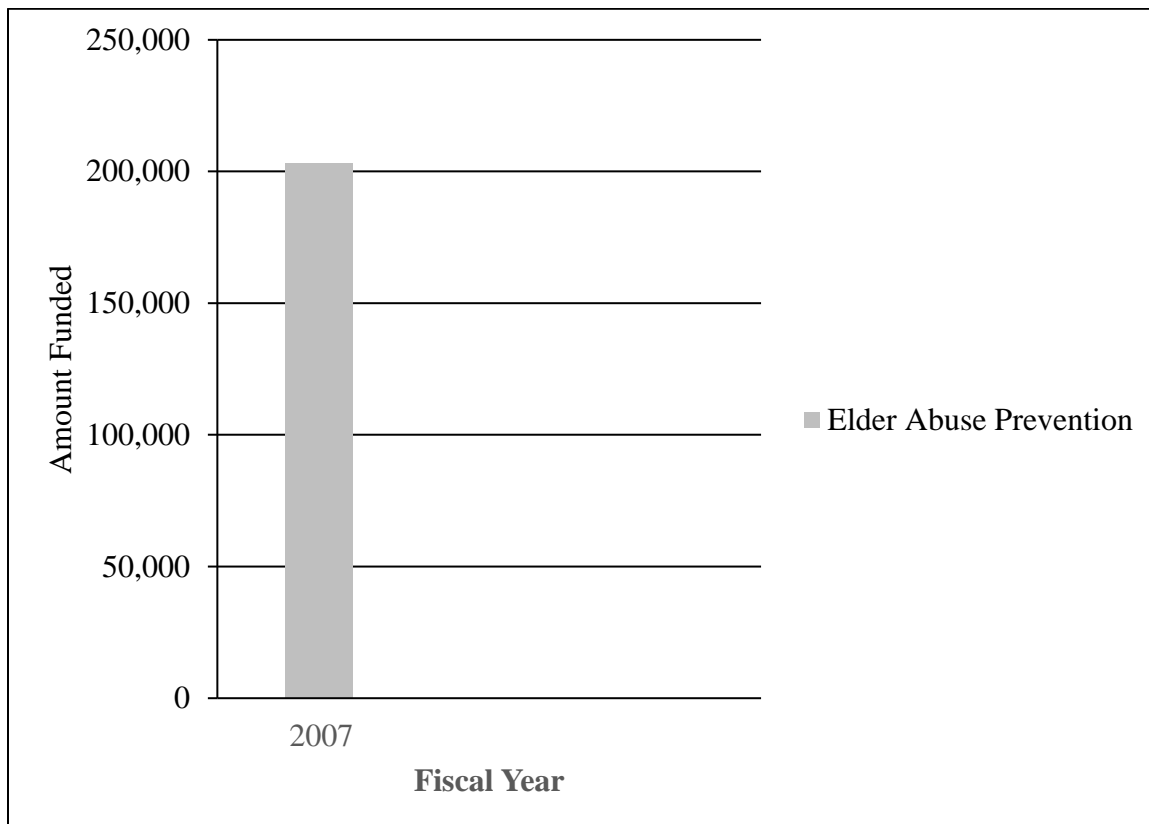to funding related issues (Illinois Department on Aging, 2017a).

Figure 13. Funding for Elder Abuse Prevention Fiscal, Year 2008. Retrieved from United States Department of Health and Human Services, Administration for Community Living, *Annual Reports.*

Figure 13 showed a significant decrease in the allocated grant money that the state of Illinois receives, with a reduction of $5,663 for a total allocation of $197,384 a significant decrease from the previous year (United States Department of Health and Human Services, Administration for Community Living, 2008b).

Elder abuse provider agencies in the state of Illinois reported that the amount of reimbursement was not sufficient to cover operating costs, which suggest that need for further funding (State of Illinois Department on Aging, 2004).

Figure 14. Funding for Elder Abuse Prevention, Fiscal Year 2009. Retrieved from United States Department of Health and Human Services, Administration for Community Living, *Annual Reports.*

Figure 14 revealed no decrease or increase but rather the same amount allocated from the previous year with a total grant allocation of $197,384 for the state of Illinois for the 2009 year (United States Department of Health and Human Services, Administration for Community Living, 2009b).

According to the State of Illinois Department on Aging (2005) the number of reported cases of elder abuse is rising, in the southern areas of the state as well as in the city of Chicago and surrounding cook county. As cases of elder abuse rise so will the need for funding to help deliver the services that assist victims of elder abuse.
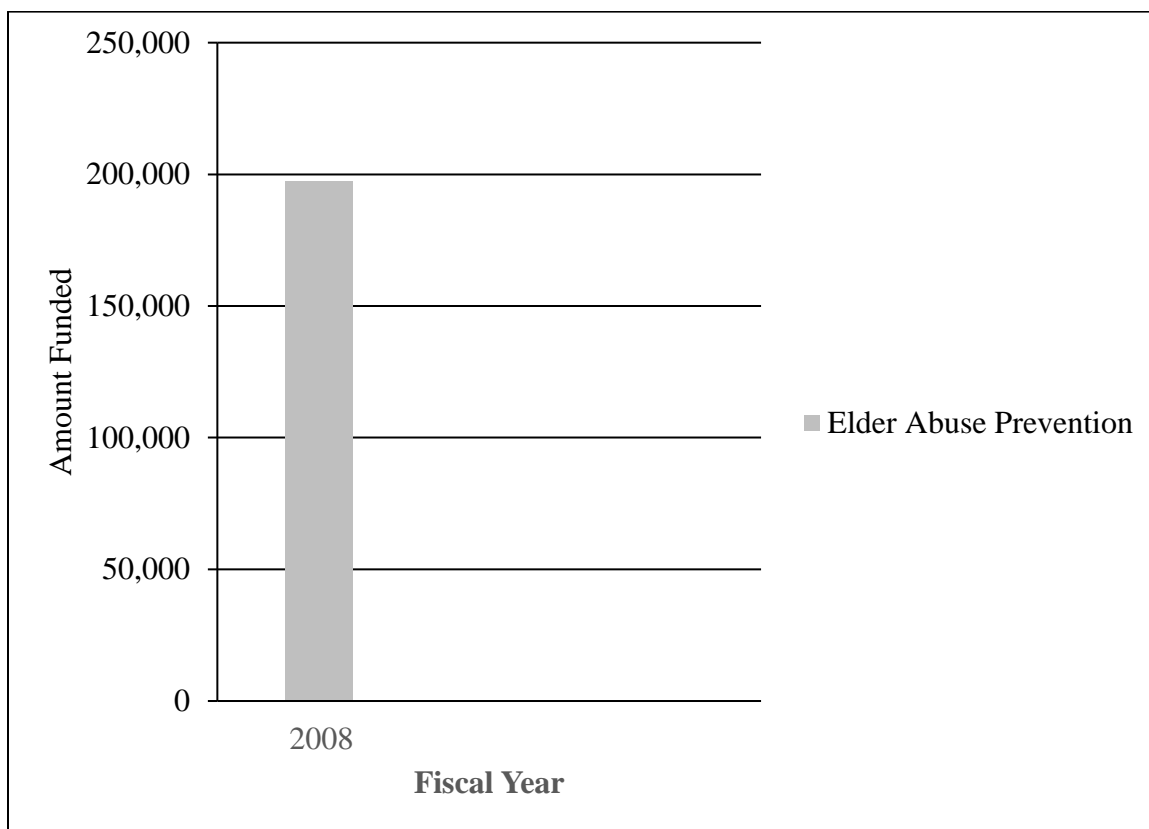
Figure 15. Funding for Elder Abuse Prevention, Fiscal Year 2010. Retrieved from United States Department of Health and Human Services, Administration for Community Living, *Annual Reports.*

Figure 15 showed no change in the amount given to the State of Illinois with

$197,384 being given for elder abuse prevention programs and services for the 2010 year

(United States Department of Health and Human Services, Administration for

Community Living, 2010b).

Training concerning elderly financial abuse continues to be a significant goal as

the Illinois Department on Aging strives to have every financial institution trained on

detecting suspected elder abuse (State of Illinois Department on Aging, 2006).

Maintaining training programs requires funding so that the training can be conducted on a

regular basis because it is through training that awareness for elder abuse is created.
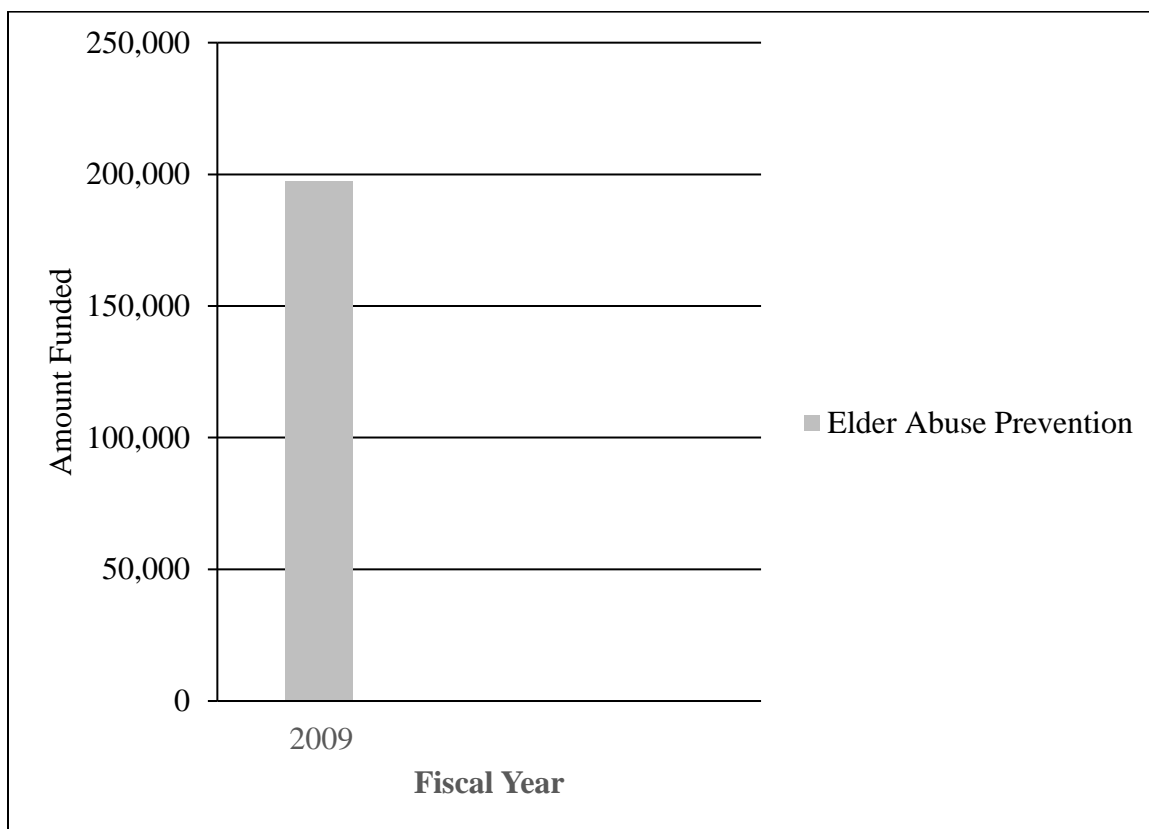
Figure 16. Funding for Elder Abuse Prevention, Fiscal Year 2011. Retrieved from United States Department of Health and Human Services, Administration for Community Living, *Annual Reports.*

Figure 16 revealed no change in the amount allocated to the State of Illinois for elder abuse prevention programs and service with only $197,384 being awarded for the 2011 year (United States Department of Health and Human Services, Administration for Community Living, 2011b).

Programs that were created to detect self-neglect as a type of abuse had been difficult to implement throughout the state due to insufficient funding (State of Illinois Department on Aging, 2007).
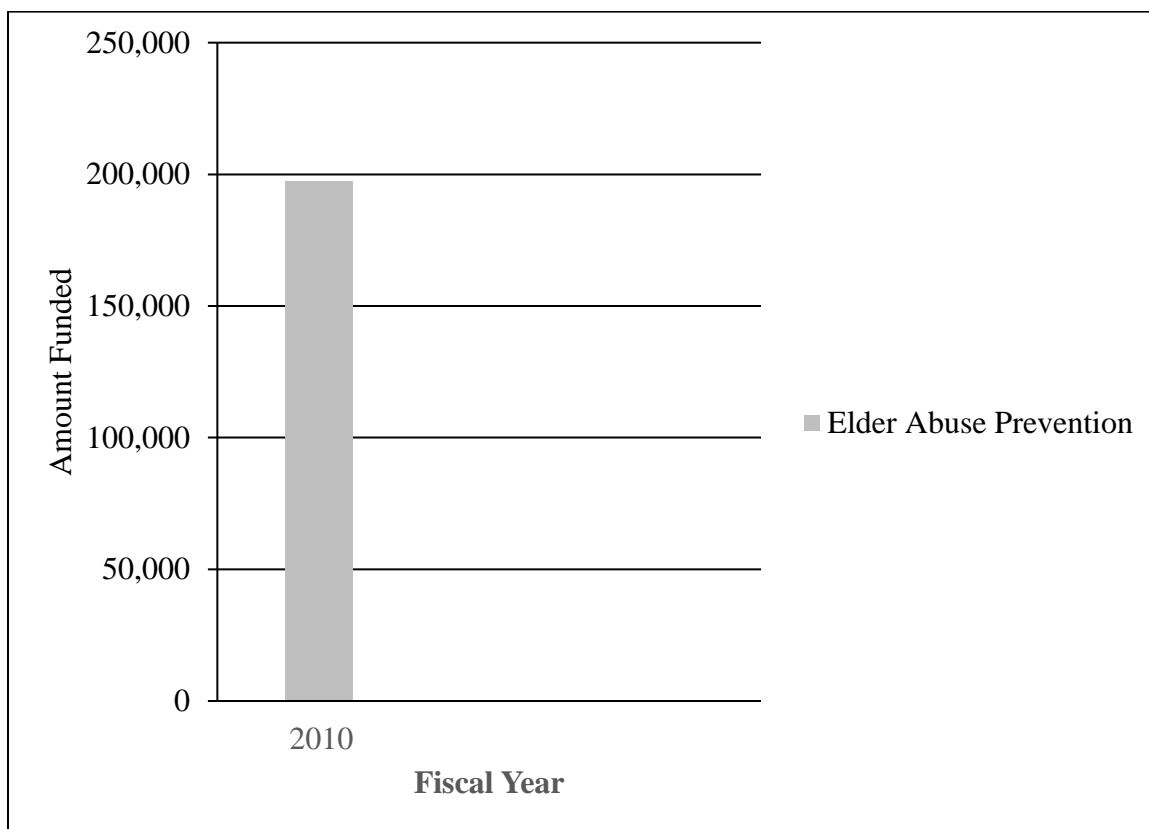
Figure 17. Funding for Elder Abuse Prevention, Fiscal Year 2012. Retrieved from United States Department of Health and Human Services, Administration for Community Living, *Annual Reports.*

Figure 17 showed only $197,384 being allocated to the State of Illinois for elder abuse prevention programs and services, which was the same amount as the previous year (United States Department of Health and Human Services, Administration for Community Living, 2012b).

The state of Illinois continues to develop programs that will assist in generating public awareness concerning elder abuse, which has received some funding from the Illinois Department on Aging (State of Illinois Department on Aging, 2008). To fully keep programs operational there must be sufficient funding provided and with the creation of new programs, funding cannot be neglected.
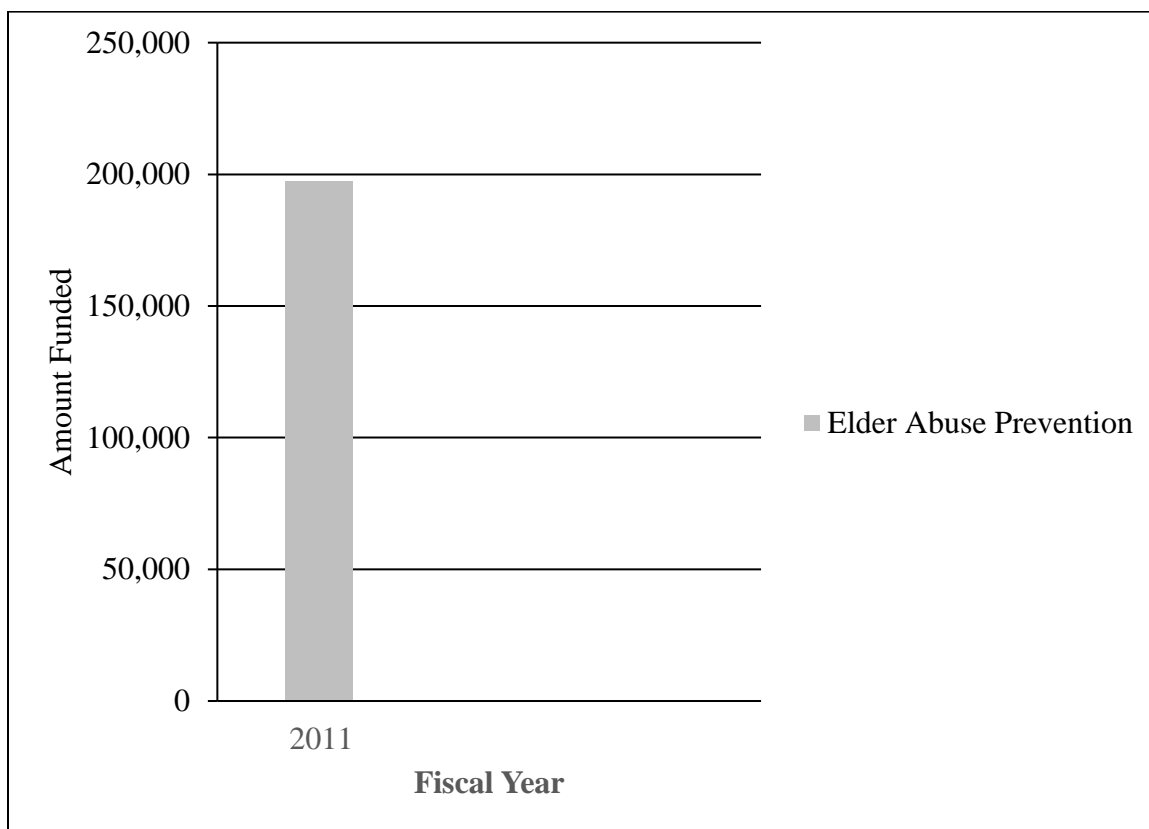
Figure 18. Funding for Elder Abuse Prevention, Fiscal Year 2013. Retrieved from United States Department of Health and Human Services, Administration for Community Living, *Annual Reports.*

Figure 18 showed no change in the funding allocated for the 2013 year concerning elder abuse prevention programs and services with $197,384 only being given to the State of Illinois (United States Department of Health and Human Services, Administration for Community Living, 2013c).

The Elder Abuse Fatality Review Team was formed as another program to investigate suspicious deaths of individuals pertaining to the elderly population in the state of Illinois (State of Illinois Department on Aging, 2009). The addition of elderly related programs in the state of Illinois conveys the crucial need for funding if the programs are to be successful.
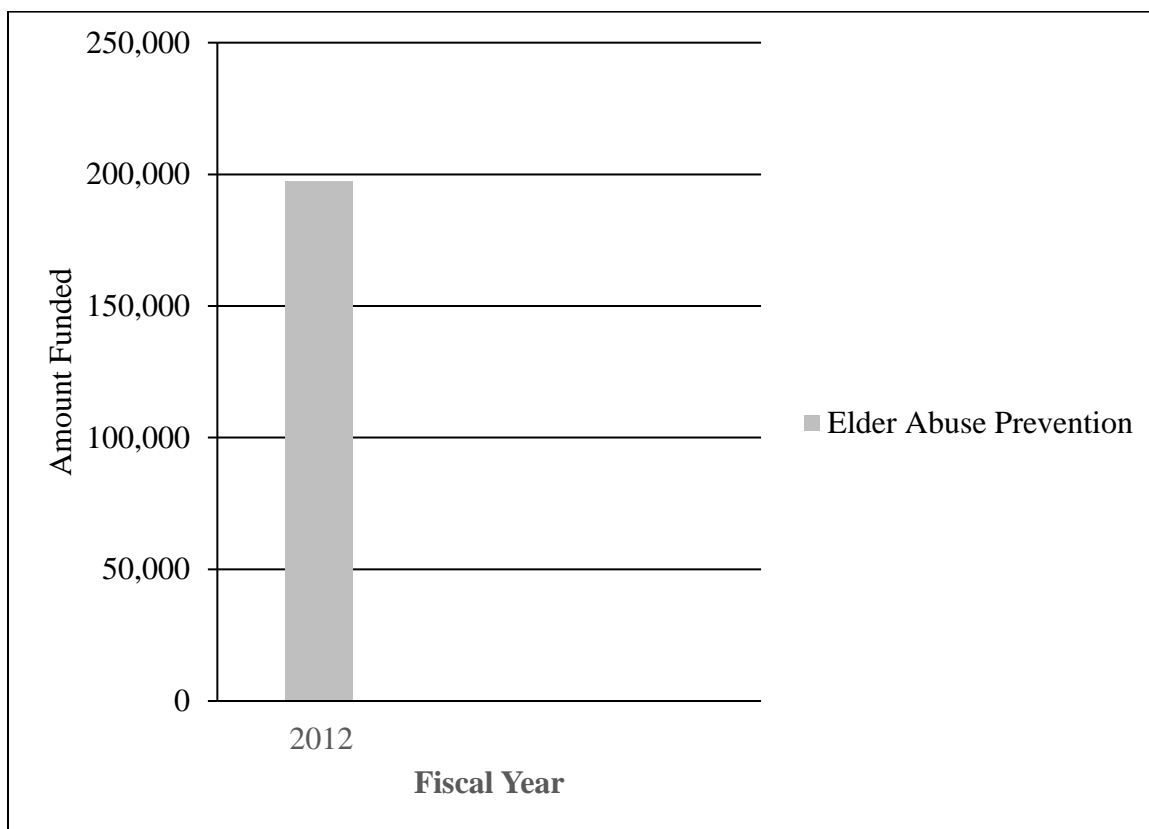
Figure 19. Funding for Elder Abuse Prevention, Fiscal Year 2014. Retrieved from United States Department of Health and Human Services, Administration for Community Living, *Annual Reports.*

Figure 19 revealed that the State of Illinois only received $197,384 for the 2014

year, the same amount given the prior year (United States Department of Health and

Human Services, Administration for Community Living, 2014b).

During the 2010 fiscal year fourteen training sessions were conducted to help

keep banks updated on how to properly detect and report suspected elder abuse (State of

Illinois Department on Aging, 2010). Maintaining yearly training requires the need for

significant funding so that elder abuse may be effectively addressed.

Figure 20., Funding for Elder Abuse Prevention, Fiscal Year 2015. Retrieved from United States Department of Health and Human Services, Administration for Community Living, *Annual Reports.*

Figure 20 revealed no change in the amount of funding received by the State of Illinois as again only $197,384 was given for elder abuse prevention programs and service for the 2015 year (United States Department of Health and Human Services, Administration for Community Living, 2015b).

Training for financial institutions has expanded to include staff, that have direct contact with elderly customers so that any suspected case of financial abuse may be reported (State of Illinois Department on Aging, 2011). Any expansion of the current training programs requires that there be sufficient funding to keep these programs operational on a yearly basis.
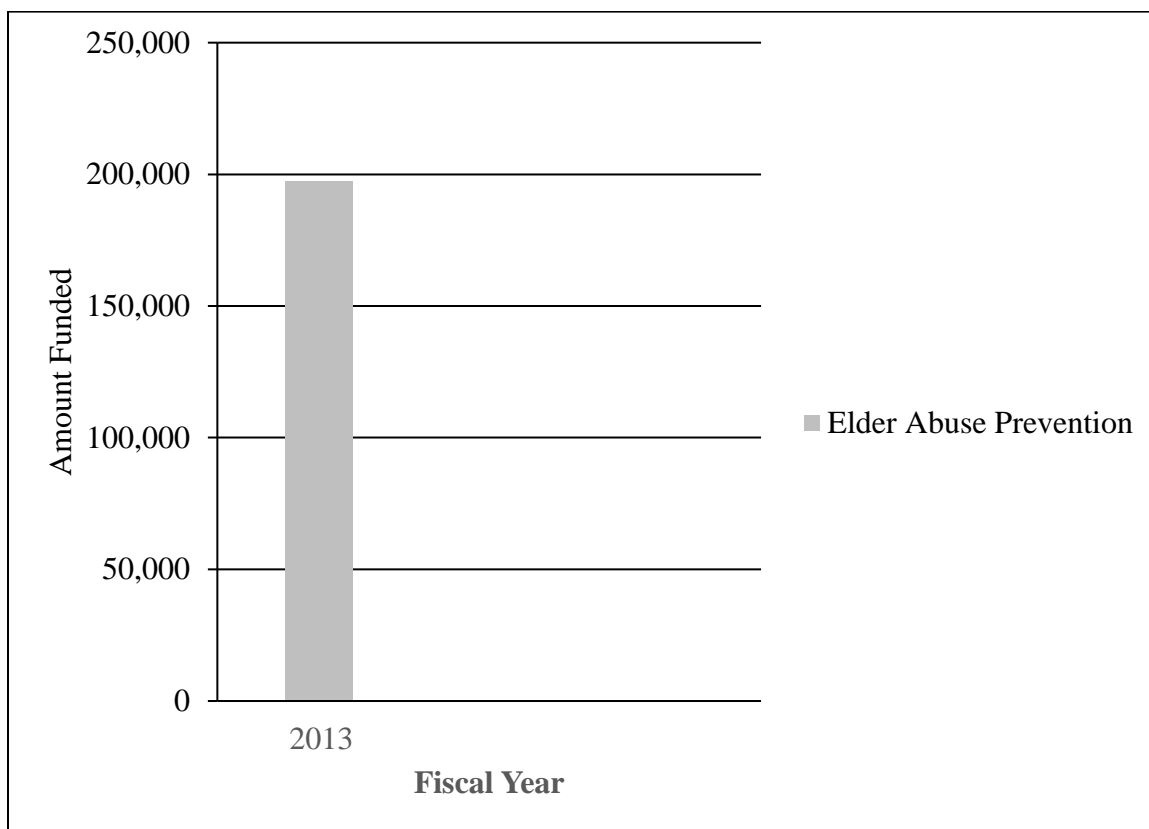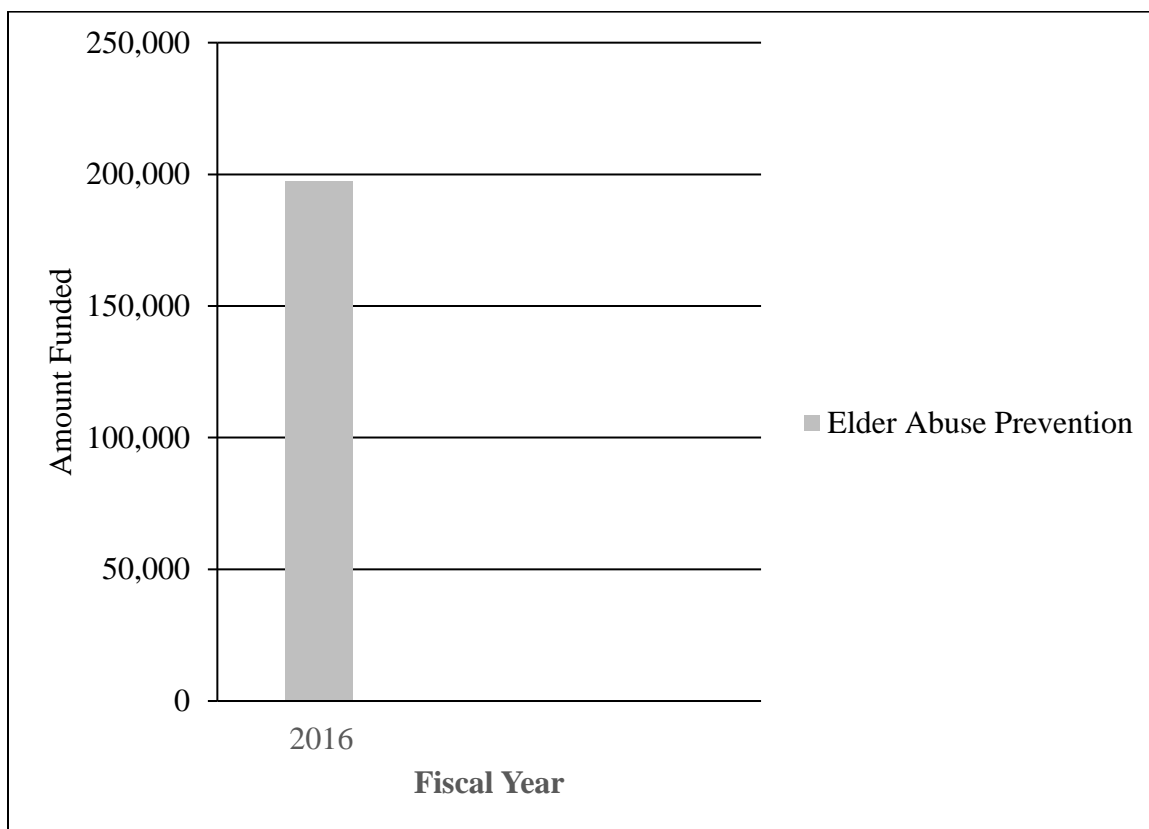
Figure 21. Funding for Elder Abuse Prevention, Fiscal Year 2016. Retrieved from United States Department of Health and Human Services, Administration for Community Living, *Annual Reports.*

Figure 21 showed no movement in the amount of grant money allocated to the

State of Illinois designated for elder abuse prevention programs and services as only

$197,384 was allocated for the 2016 year (United States Department of Health and

Human Services, Administration for Community Living, 2016b).

The Elder Abuse and Neglect Program helps to certify caseworkers throughout

the state of Illinois, ensuring that each caseworker is informed on the protocols for

investigating cases of suspected elder abuse (State of Illinois Department on Aging,

2012). Certification of caseworkers is a difficult task that requires funding if there is to be

an effective response to elder abuse and in the manner in which it is resolved.
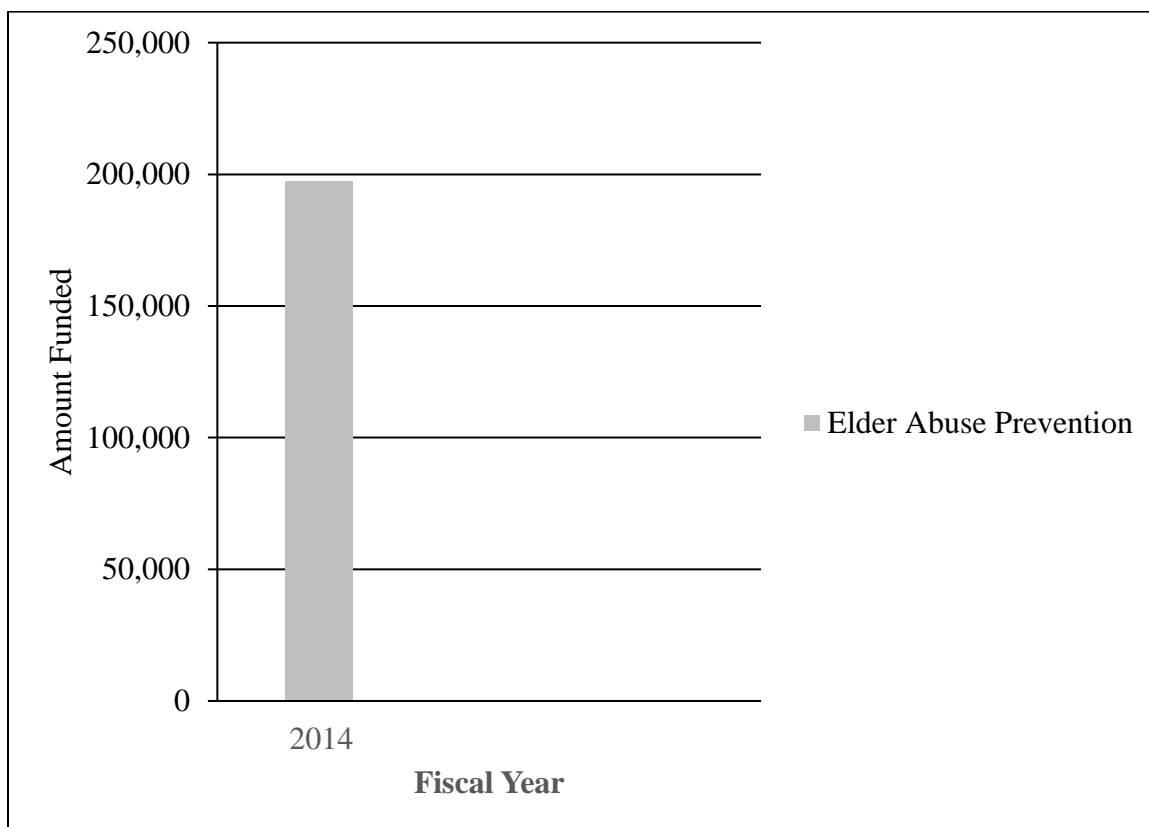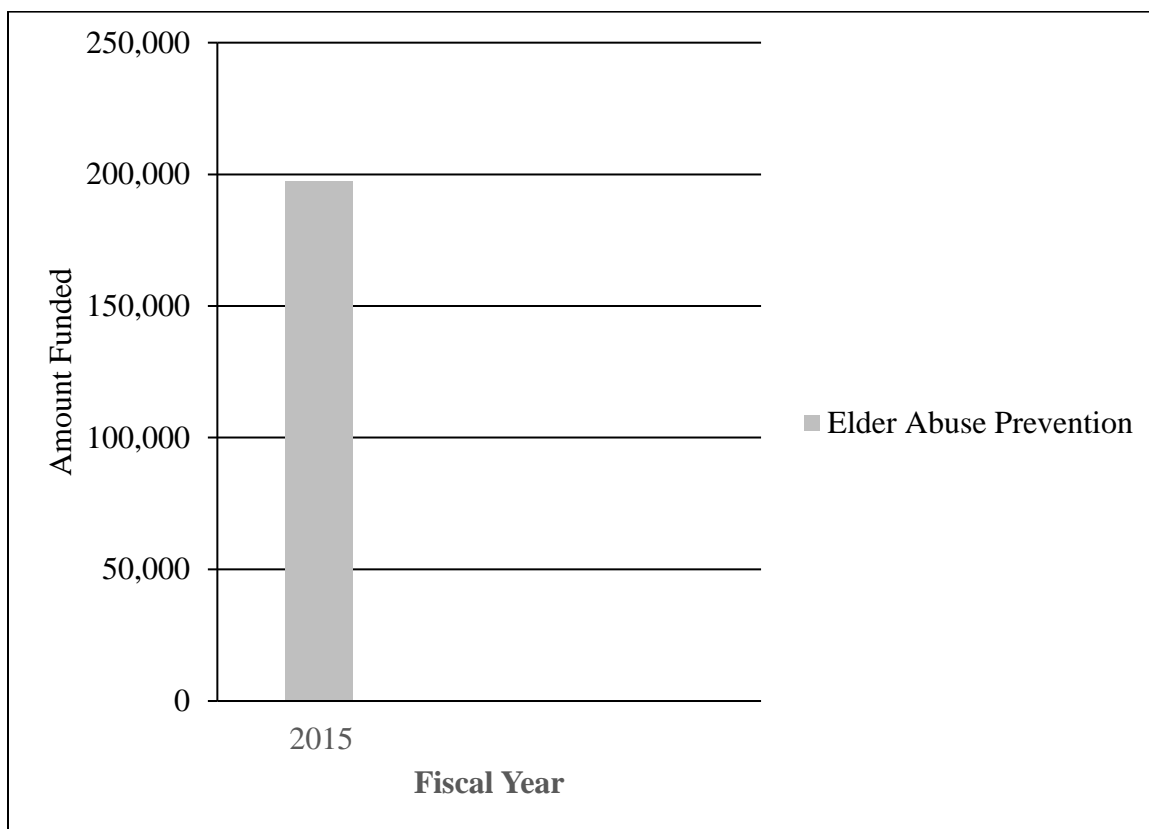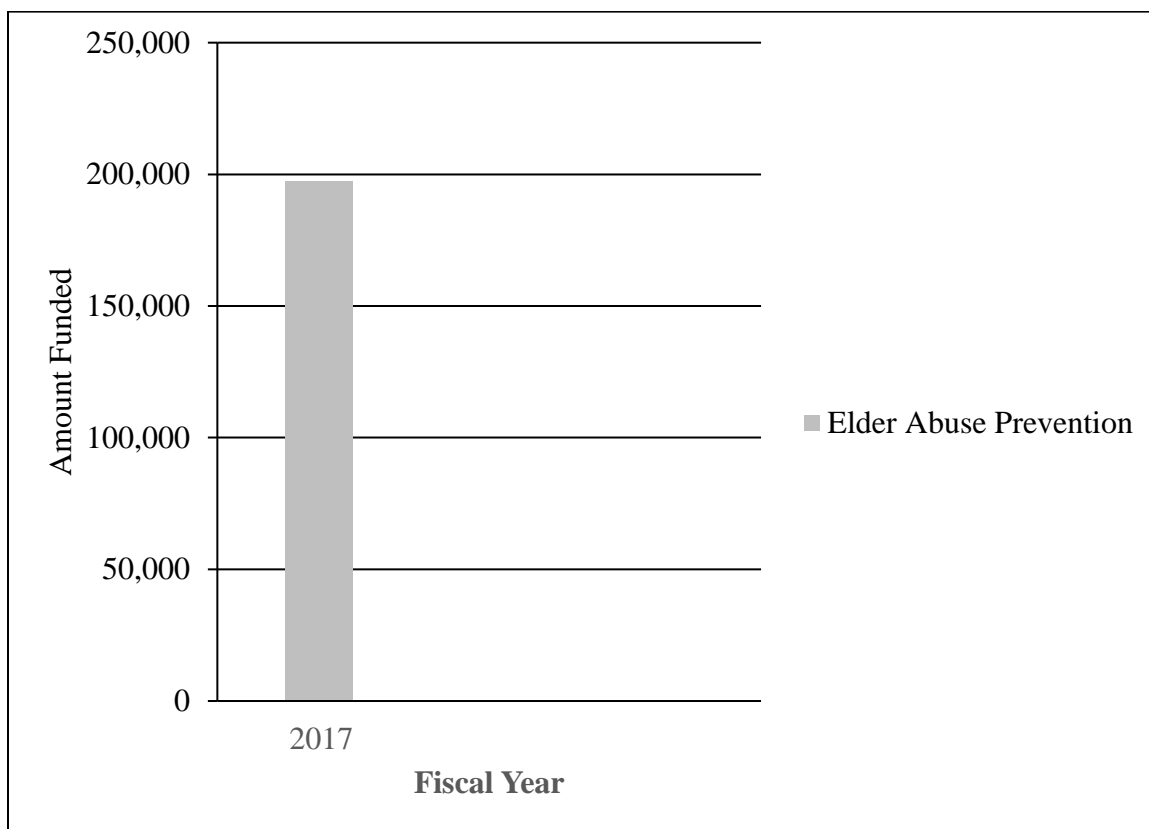
Figure 22. Funding for Elder Abuse Prevention, Fiscal Year 2017. Retrieved from United States Department of Health and Human Services, Administration for Community Living, *Annual Reports.*

Figure 22 showed for the 2017 year that the state of Illinois only received

$197,384 with neither an increase nor decrease from the previous year in terms of the

amount grant money allocated for elder abuse prevention programs and services (United

States Department of Health and Human Services, Administration for Community

Living, 2017b).

During the 2013 fiscal year, the Department on Aging conducted several training

seminars in the attempt to train various types of departments in the state of Illinois such

as the department of mental health, human services and the division of developmental

disabilities regarding the issue of elder abuse (State of Illinois Department on Aging,

2013). The ability to train other department within the state of Illinois will require extensive funding if it is to be successful.

The grant allocation derived from title VII showed a very insignificant amount of funding being given for elder abuse prevention programs and services for the State of Illinois. The charts revealed a slow decrease with the amount of funding reaming stagnant for the last ten years.

State Level

The federal level is one area of funding received by the 13 planning and service areas as well as the 45 service providers. The next level of funding is derived from the state level, which in this case will be from the State of Illinois. The Illinois Department on Aging, the organization established as a direct result of the Older American Act, provides funding to organizations that offer programs and services to older adults in the State of Illinois. In 2007, $509,392.40 was given by the Illinois Department on Aging to various organizations and programs within the State of Illinois (Illinois Department on Aging, 2007). During the 2008 fiscal year, a total of $541,017.7 was distributed to the many organization that provides assistance for the elderly in the State of Illinois (Illinois Department on Aging, 2008). During the 2010 fiscal year, the Illinois Department on Aging gave $745,171.10, a significant increase from previous years (Illinois Department on Aging, 2010). According to the State of Illinois (2016), $19,259,700.00 was appropriated for elder abuse and neglect services, $23,059,700.00 was allocated for the 2015 fiscal year, and $22,400,000 was proposed for the 2016 fiscal year. During the 2017 fiscal the Illinois department on aging appropriated $4,675,546 for elder abuse and

neglect programs and other elderly programs (Illinois Department on Aging, 2017a). No specific funding information for elder abuse programs and services for the 2018 fiscal could be retrieved from the Illinois Department on Aging.

United Way of Illinois

The United Way of Illinois is an organization that helps contribute funding towards social services and programs throughout the State of Illinois. According to United Way of Illinois (2014b) due to the budget cuts in the State of Illinois, United Way's fund appropriation also decreased as programs such as human services. Furthermore, as budgets cuts continued, United Way vowed to continue working with legislatures to keep funding human services in the state of Illinois (United Way of Illinois, 2015b). According to the United Way of Illinois (2016c), the 2016 Illinois budget impasses negatively affected the funding the United Way of Illinois was able to give to all the human services it supported. Dealing with state budget cuts, the United Way of Illinois sought to remain the biggest private funder of human services as well as work with organizations to keep assisting those in need in the State of Illinois (United Way of Illinois, 2017b).

The United Way of Illinois uncovered that in some areas in the State of Illinois there was a budget of $500,000 while other regions had a budget of $15,000,000 thus making it more essential to provide funding (United Way of Illinois, 2015c). Moreover, according to the United Way of Illinois (2016b) as the State of Illinois struggled to maintain its budget, more than half of the human services have seen programs being terminated, thus putting a strain on United Way to help fund as many human services as

possible, while trying to work with legislatures. According to the statistics collected by

the United Way of Illinois, the number of clients being served has decreased due to

budget cuts by the State of Illinois and reduced funding for these social services (United

Way of Illinois, 2015d). During the 2016 fiscal around 40,000 elderly individuals were

turned away due to lack of funding for these programs and services (United Way of

Illinois, 2016d). Senior services have had to borrow $3,500,000 to stay open, and as

budget cuts have continued in the State of Illinois, the results have led to less funding

(United Way of Illinois, 2016c). However, in 2017 69% of agencies have only received

partial funding from the state, which has led to fewer clients being able to be served

(United Way of Illinois, 2017c). According to the United Way of Illinois (2013)

procedures were simplified so that agencies would be able to receive funding easier.

Development of the 24hour information line and its implementation into 43 of the state's

102 counties has led to better chances for individuals to receive assistance and funding

(United Way of Illinois, 2014a). For the 2015 fiscal the United Way of Illinois distributed

a total of $110,000,000 to agencies throughout the state of Illinois (United Way of

Illinois, 2015a).

　　　　Furthermore, during the 2016 fiscal year, it was reported that over 1,000,000

clients were refused assistance due to the lack of funding (United way of Illinois, 2016a).

Continued budget cuts from the State of Illinois has made the United Way of Illinois to

take a more significant role in providing funds for many of the state's human health

services and other related programs (United Way of Illinois, 2017a). United Way of

Illinois has continued to work through the budget impasse and admitted that it could not

provide enough funding to keep every agency within the state of Illinois operating

(United Way of Illinois, 2018). The United Way has been one of the most significant

assets in the State of Illinois due to its funding of human health and other related services

but has also struggled due to the state's budgetary issues.

Summary

This chapter was about addressing the research questions through the information

collected by the interview and the secondary data collected. As stated earlier in the study,

one of the main objectives of the study was to answer the research questions. This chapter

gave the reader a precise guide to the type of participants that were used in the study as

well as how the data was collected from the participants. This study focused on the 13

planning and service area directors as the primary sample group and demographics of the

study as the attempt was to acquire expert knowledge as well as personal experiences due

to the qualitative nature of the study. The method of analyzing the data was stated in a

manner that way clear and precise as well as consistent with the methodology of the

study as well as helping to maintain the trustworthiness of the study. The concept of

developing themes and codes based on the data collected was demonstrated in the way

the results were presented. Another idea that was presented was being able to maintain

the trustworthiness of the study. This study achieved trustworthiness through its ability to

remain consistent in every detail as well as reporting every type of data even information

that is counter to the objective of the study. Having stated every result was accomplished

to assist in the maintaining of the trustworthiness of the study as well as the insurance

that researcher bias was not an issue in the study. The process in which the data was

collected from the participants was completed in the same manner so as to maintain

trustworthiness, credibility, transferability, dependability, and confirmability. The

directors who had participated in the study exclaimed that there is a need for resources

which includes funding, staffing and other types of resources. The four main themes that

emerged from the directors were administrative, restriction, shortcoming, and

improvement. Meanwhile, the adult protective service showcased the emergence of

policies that were established to better respond to elder abuse. However, the data received

from the interview participants conveyed that some of the policies are restrictive and

could be improved so that more elder abuse cases may be investigated.

The results revealed regarding funding, that federal funding had remained

stagnant with no increase but also no significant decrease, although there were trends

when funding decreased from previous years. However, state-level funding in recent

years has seen improvements in funding but it was unclear how much specific funding

was given solely for elder abuse as the majority of state funding was appropriated for

elder abuse and various neglect programs, which are not exclusively for the elderly as

some neglect programs include child abuse and other types of neglect. Finally, funding

from the united way of Illinois saw its funding for human services programs being

strained due to state budgetary issues. The United Way of Illinois iterated that it tried to

fund as many human service programs as possible but faces its challenges due to state

budgetary cuts. What can be concluded is that funding for elder abuse is very inconsistent

and stagnant, with times not enough for services and programs to effectively operate at its

best. Overall, the data collected seemed to indicate that there is room for improvement in

terms of funding and policy regarding elder abuse. The data also revealed that every

service provider is doing its best given the policies imposed as well as the amount of

funding being granted and is why there is a need for improvement.

      Chapter 5 will explore in greater detail the implications of the results, limitations,

and recommendations.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

The purpose of this study was to bring to the fore the degree of effectiveness of the current policies and the role that these policies play regarding the 13 planning and service areas on the issue of elder abuse. Which would be based on the potential findings this study will generate and thus determine the role played by the current policies. Also, the study was conducted to increase the knowledge of how current policies affect the manner in how cases of elder abuse are responded to and handled in the State of Illinois. The study was also intended to give the reader personal insight into those individuals that utilize the policies, as well as expert knowledge, regarding elder abuse. The study was also conducted to better improve the current response to elder abuse by examining weaknesses in the current policies that govern how a case of elder abuse is handled.

Some of the key findings that were produced in this study were in terms of funding and the four themes as they both addressed the two research questions. The four themes that emerged from the interviews were administrative, shortcoming, restriction, and improvement. These four themes reflected the participants personal experiences as well as knowledge regarding the current policies and these policy's influence in their daily operations. Each theme reflected an experience the participant encountered on the job, which gives personal insight to the current policies governing elder abuse.

Funding was seen as stagnant when viewing funding at the federal level, while the state level funding was higher than that of the federal level; however, it was bundled with other types of human service programs and services with no funding specific to elder

abuse. The state's largest non-governmental organization, the United Way of Illinois, found itself battling state budgetary constraints as it tried to fund human service programs and services. Regarding the 13 planning and service area directors, despite 5 of them not participating in the study, four themes emerged from the directors who did participate.

Interpretation of Findings

The data that were collected from both secondary data sources and the planning and service area directors not only confirmed but extended the knowledge from the previous studies which were explored in Chapter 2 during the literature review. One particular finding which was confirmed by the data collected was the issue of respecting the individual despite suspected abuse. According to Choi, Brownell, and Moldovan (2017), an individual regardless of age should be respected and not have his dignity infringed. Moreover, Director2B asserted that the right of the victim must be respected if he or she decides to refuse assistance, which may give way to the notion that nothing has been done to address the abuse. This finding not only confirmed the literature but extended the knowledge by delivering first-hand experience and explaining how this type of response may be misinterpreted as failing to respond appropriately. The study confirmed the lack of networking between law enforcement and other related fields and service providers concerning cases of elder abuse. Fisher, Rudd, Walker, and Stewart (2016), asserted that many health physicians are unable to recognize the many symptoms of elderly abuse properly. Both Director 9I and Director13M iterated the need for better networking between law enforcement, social services, and health care providers and the caseworkers who are investigating suspected cases of elder abuse. Another finding that

extended the knowledge was the idea that social isolation is another situation that lends

itself to potential elder abuse. In the literature, it was conveyed that social networks and

social support were two factors that may lead to reports of elder abuse (Beach, Schultz, &

Sneed, 2016). However, Director 8H asserted that social isolation is another factor that

makes elder abuse more difficult to detect and investigate.

Additional finding that extended the knowledge concerned the idea of a lack of an

effective strategy in being able to prevent abuse against individuals who suffer from

health issues (Mikton, Maguire, & Shakespeare, 2014). Director 11K described the lack

of resources and access to resources such as health and mental health services. The idea

that there is a lack of access to such health-related resources extended the knowledge than

merely that there is no effective strategy. The findings also extended knowledge on the

issue of family members needed to be studied as a part of investigating cases of elder

abuse (Buzgova & Ivanova, 2011). According to Director 2B, Director 8H, Director 9I,

and Director 11K family members increased the level of difficulty when investigating a

case of elder abuse. Another finding that confirmed the literature was the statement that

the adult protective service focuses its resources on the victim of elder abuse and does not

address or investigate the perpetrator of the abuse (Jackson & Hafemeister, 2016). Every

director confirmed that the adult protective service conducts the majority of the

investigation focusing on solely on the victim during suspected cases of elder abuse.

Another finding that extended the knowledge covered in the literature was how elder

abuse is defined, which dictated the method in which it is investigated (Jirik & Sanders,

2014). According to Director 11K, the adult protective service does not investigate any

case unless it meets its standards of what constitutes elder abuse. The results also

confirmed the notion that the adult protective service fails to conduct a follow up on a

case, which may continue the abuse (Jackson & Hafemeister, 2013). Director 2B stated

that there is a false belief that the adult protective service will take guardianship of the

elder abuse case and move the victim to a secure environment free from the abuse.

The results of the study also extended the knowledge of previous studies in

concern with the staffing issues that are confronted. The literature iterated that in many

cases staff is overwhelmed by the number of cases being reported (Johansen, 2014). Both

Director 8H and Director 11K responded in the interview that in terms of resources they

were stretched thin in terms of staffing and turnover by current employees. The findings

in this study also extended the knowledge on the issue of creating measurement tools to

evaluate the performance of the adult protective service (Iris, Conrad, & Ridings, 2014).

Director 8H suggested the need for further partnerships with financial institutions and

have them be trained in being able to detect symptoms of elder abuse in the form of

financial exploitation. Through such training, the chances for successful detection of

elder abuse may be achieved and may be seen as a sign of success for the adult protective

services.

Regarding the reporting of elder abuse as covered in the literature review in

Chapter 2 of this study, the findings extended and confirmed the knowledge of the

previous studies. In the literature review according to Strasser and Fulmer (2007), there is

an enormous amount of pressure for health professionals to report suspected cases of

elder abuse, which may be hindered due to lack of training. Director 9I iterated that there

were negative issues with doctors willing to cooperate and sign forms stating that the elderly victims are impaired during investigations into suspected cases of elder abuse. A significant confirmation that the results of this study provided was the lack of knowledge regarding how to adequately report suspected cases of elder abuse (Pillemer, Connolly, Breckman, Spreng, & Lachs, 2015). Director 13M, Director 2B and Director 9I said the need for greater awareness and training of what elder abuse is so that it may be reported as well as increasing partnerships with entities such as law enforcement, financial institutions, and other health service providers. The findings overall appeared to confirm many of the assertions made in the literature review, while also extending the knowledge base.

The results in relation to the theoretical framework are appropriate and reflect the framework as it was designed. The theoretical framework for this study was the narrative policy framework. As established in the earlier chapters of this study, the narrative policy framework is a framework that offers the researcher an approach in analyzing content concerning policies that deal with a social issue (Veselkova, 2014). The theoretical framework was applied during the interview of the planning and service area directors, as the objective was to evaluate the current policies dictating the response and investigation of elder abuse cases. The narrative or reactions from the participants abide by the narrative policy framework as it utilizes the personal narratives to evaluate current policies regarding a particular subject, which for this study was the social issue of elder abuse.

Furthermore, Saunders and Sin (2014) iterated that narratives used as a method to collect data are able to address challenges that are solely experienced by those directly affected by the policy. The majority of the responses from the participants dealt with the current policies that governed the investigation of elder abuse. The data reflected shortcomings of the current policies as many of the directors desired that policies would go further as well as provide better protection for caseworkers. Director 2B suggested that the screening process be expanded and improved to match the one utilized in the state of Texas, which would allow for better response to suspected cases of elder abuse. This type of response or narrative correctly takes advantage of the narrative policy framework in that it evaluates the current policy and uses personal experiences from operating under the current system to make a credible judgment on the policy in terms of effectiveness. Each of the participants gave their insight into the policies from their own experience which was influenced by where they operated from within the state of Illinois. As established earlier the State of Illinois has a total 13 planning and service area directors, which ensure that the policies and standards are being upheld by the 45 service providers throughout the State of Illinois. The secondary data covering the financial data and filling in the gap for the five directors that did not wish to participate in the study worked well under the narrative policy framework because it complemented the responses of the directors as they were dependent on funding, which influenced their experiences regarding the policies governing investigation of suspected cases of elder abuse. The primary objective of utilizing the narrative policy framework was to be able to properly analyze the responses from the directors, as their answers would give an insight

to the effectiveness of the policy by the collection of personal narratives, which ultimately would address the research questions posed at the beginning of the study. Overall in the context of the theoretical framework that was utilized in this study, the results matched the objective of the framework because as mentioned the intent was to use the narratives of the participants to determine whether or not the current policies regarding elder abuse were effective.

Limitations of the Study

This study was limited to five directors that willingly participated and three who responded but did not wish to sign the consent form, while the remaining five directors refused to participate in the study. Thus the study had to rely on secondary data to fill in the gap left by the five directors, who declined to participate in the study. Therefore the response from the eight directors limits the study in that not all 13 directors responded, which leaves potential data from different areas within the state of Illinois not be heard and analyzed. The potential data may have brought different personal experiences that could have confirmed what the other directors presented in the interview or presented a different opinion on the current policies. This study is limited in that the results may be different from a study that had all directors participate in the interview rather than 5 of the 13 directors plus the additional three directors who responded but did not sign the consent form. Another limitation is that the data was collected through interview and secondary data methods and was not collected through observation. Observation as a data collection method may have brought a more personal response that could have made it more precise the level of effectiveness the current policies are in responding to elder

abuse cases. Perhaps a study that utilized the observation method in conjunction with the interview could have generated a more precise nature of the effectiveness of the current policies or offer a different perspective on the current response to cases of elder abuse. These limitations based from the results collected from the study are appropriate in that the study expected to interview all 13 of the planning and service area directors but was not able and had to utilize secondary data to help fill in those gaps that were created.

Recommendations

The data collected in this study offered critical insight into the current policies that dictate how cases of elder abuse are handled and investigated. Many of the participants had recommendations based on their personal experience with the current policies as to what may be accomplished to improve the current situation regarding elder abuse. The recommendations that this study suggests to improve the response to elder abuse based on the results collected was to increase awareness and training between the service providers and organizations such as law enforcement, health services, and financial institutions so that symptoms of elder abuse may be detected and adequately addressed most properly. The results also recommend better screening policies as well as better definitions of what constitutes elder abuse so that a more effective response could be conducted. Another recommendation is to create better networking, so that information concerning elder abuse is available thus making the response to elder abuse effective while minimizing shortcomings.

Future Research

A recommendation for future research would be to utilize the observation method as a way to collect data by being able to observe policy being practiced in real time along with the interview so that a more personal view over the current policies may be evaluated more comprehensively. Another recommendation would be to both interviews the 13 directors as well as elderly individuals who receive assistance from the service providers so that more data is collected to analyze the current policies better. These recommendations were based on the results obtained as well as the literature review. Studies conducted based on these recommendations have the potential to increase the knowledge base further and also increase awareness regarding the social problem of elder abuse.

Implications

The empirical data collected in this study has many positive social change implications that may affect the individual as well as the service providers. Much of the previous studies focused on the elderly individual, which only allowed for data that was focused on the result of the policy and did not address the funding and policy directly. This study collected information on the policies through the interviewing of the planning and service area directors, who have an obligation to enforce those policies on the service providers and therefore are able to discuss the effectiveness of the current policies dictating how elder abuse is investigated. The study also analyzed the effects of funding in relation to the current policies. This study serves the purpose of creating a foundation of where to begin to further the empirical data on the current policies governing elder

abuse, which can eventually lead to changes in the current policies, thus leading to a more effective response to elder abuse. As established earlier in the study the results of this study were able to shed light on the effectiveness of the current policies, which contain the positive benefit of allowing the reader to view what policies should be amended so that a better response to elder abuse is possible.

The results of this study contain many opportunities for potential positive social change. The obvious positive social change implication that this study includes is the increased awareness in the area of the current policies and funding that govern the response to elder abuse. This increased awareness has the potential to lead to better training programs that can address the various weaknesses that are found in the current policies, which is a positive social change that the individual may experience. The results of the study allow for a positive social change in that it will enable policymakers to view what changes may be made to the current policies and funding strategies so that improvements can be made, which will improve the services received by the elderly individual concerning suspected abuse. The positive social change that is obtained from changes made to the current policies is significant in that it will hopefully give confidence to the elderly individual to report their abuse. Viewing where the current policies fail in terms of effectiveness, can lead to positive social change in that better networking between the service providers and other social organizations such as law enforcement, financial institutions, and health care providers may be created as well as strengthen current networks, so that information is shared, and protocols are standardized so that no suspected cases of elder abuse are lost in the shuffle.

The empirical implications of this study indicate that policies have progressed, but there are still areas in which these policies may be improved to increase the effectiveness better and produce greater positive social change that may be felt and experienced by both the individual and the organization operating under the policies. The empirical data in this study imply that although there is an awareness on the issue, it does not go far enough in that it affects the networking in that law enforcement or physicians may not be able to detect early symptoms of elder abuse adequately. The implication being that this is an unperceived shortcoming in the current policy regarding the response to elder abuse as there is an assumption that there are communication and a set of protocols established between service providers and entities such as law enforcement. The empirical data showed that funding had remained stagnant, which influences the types of resources that are utilized by service providers. However as mentioned earlier the results of the study allows for greater awareness as the qualitative methodology used in the study allowed for a more personal experience concerning the policies, which gave the reader a more transparent view of the current policies and determine their level of effectiveness and what could be done to improve the current policies that set the protocols as to how elder abuse should be investigated and resolved. The overall implication that is gathered from the results collected in this study is that with the increased knowledge concerning the role the current policies and funding have over the response to elder abuse, improvements such as better training, increased funding and the development of stronger networking can be made, which may lead to positive social change.

Conclusion

Addressing the issue of elder abuse through the angles of funding and the current policies, offered a different perspective on the social issue of elder abuse rather than focus on solely the victim as was visible during the literature review. The study gathered personal data and narratives to give a close view of how the current policies influenced the response to elder abuse. This type of qualitative study allows for an easier measurement as to the level of effectiveness the current policies were in addressing elder abuse as well as what may be done to improve such responses. The narratives collected revealed that lack of access to specific resources such as staffing might be due to the amount of funding received. The take-home message that was given by the study is that both funding and policy affect and determine the effectiveness the response is to a particular social issue such as elder abuse. The study gave precise recommendations as to how policies may be improved to increase the efficiency of the response to elder abuse better; however, the study revealed budgetary constraints being experienced in the State of Illinois which affect the level of funding and thus increase the difficulty to improve the current policies The level of funding was collected and analyzed to determine possible outcomes it had on the response to elder abuse.. Overall the study showed that there is still room for improvements in the area of funding and the current policies if there is to be a significant improvement in the manner in which cases of elder abuse are handled.

References

Adult Protective Services Act, 320 I.L.C.S. § 20.

Aamodt, W. W., Terracina, K. A., & Schillerstrom, J. E. (2015). Cognitive profiles of

elder adult protective services clients living in squalor. *Journal of Elder Abuse*

& Neglect, *27*, 65-73. doi:10.1080/08946566.2014.952484

Adams, G. (2014). Decolonizing methods: African studies and qualitative research.

Journal of Social and Personal Relationships, 31, 467-474.

doi:10.1177/0265407514521765

Adams, V. M., Bagshaw, D., Wendt, S., & Zannettino, L. (2014). Financial abuse of

older people by a family member: A difficult terrain for service providers in

Australia. *Journal of Elder Abuse & Neglect, 26,* 270-290.

doi:10.1080/08946566.2013.824844

Administration on Aging. (2011). *Administration on Aging, Congressional justification,*

fiscal year 2011. Retrieved from http://www.acl.gov/sites/default/files/about-

acl/2016-09/AoA_CJ_FY_2011%5B1%5D.pdf

Administration on Aging. (2012). *Administration on Aging, Congressional justification,*

fiscal year 2012. Retrieved from http://www.acl.gov/sites/default/files/about-

acl/2016-10/FY_2012_AoA_CJ_Feb_2011%5B1%5D.pdf

Administration on Aging. (2013). *Administration on Aging, Congressional justification,*

fiscal year 2013. Retrieved from http://www.acl.gov/sites/default/files/about-

acl/2016-09/FY_2013_AoA_CJ_Feb_2012%5B1%5D.pdf

Administration for Community Living. (2014). *Administration for Community Living congressional justification fiscal year 2014.* Retrieved from http://www.acl.gov/sites/default/files/about-acl/2016-09/FY2014_ACL_CJ%5B1%5D.pdf

Administration for Community Living. (2015). *Administration for Community Living congressional justification fiscal year 2015.* Retrieved from http://www.acl.gov/sites/default/files/about-acl/2016-09/FY_2015_ACL_CJ%5B1%5D.pdf

Administration for Community Living. (2016). *Administration for Community Living congressional justification fiscal year 2016.* Retrieved from http://www.acl.gov/sites/default/files/about-acl/2016-09/FY_2016_ACL_CJ%5B1%5D.pdf

Administration for Community Living. (2017). *Administration for Community Living congressional justification fiscal year 2017.* Retrieved from http://www.acl.gov/sites/default/files/about-acl/2016-09/FY_2017_ACL_CJ%5B1%5D.pdf

Administration for Community Living. (2018a). *Administration for Community Living congressional justification fiscal year 2018.* Retrieved from http://www.acl.gov/sites/default/files/about-acl/2017-11/FY2018-ACLBudgetJustification.pdf

Administration for Community Living. (2018b). *Administration on Aging.* Retrieved from http://www.acl.gov/node/915

Administration for Community Living. (2018c). *History.* Retrieved from

http://www.acl.gov/about-acl/history

Administration for Community Living. (2018d). *Mission and strategic plan.* Retrieved

from http://www.acl.gov/about-acl

Administration for Community Living. (2018e). *Older Americans Act*. Retrieved from

http://www.acl.gov/about-acl/authorizing-statutes/older-americans-act.

Administration for Community Living. (2018f). *Older Americans Act.* Retrieved from

http://www.acl.gov/node/124

Administration for Community Living. (2018g). *Organization.* Retrieved from

http://www.acl.gov/about-acl/organization

Ahmed, A., Choo, W. Y., Othman, S., Hairi, N. N., Mohd Hairi, F., Mohd Mydin, F.H.,

& Illiani Jaafar, S. N. (2016). Understanding of elder abuse and neglect among

health care professionals in Malaysia: An exploratory survey. *Journal of Elder

Abuse & Neglect, 28,* 163-177. doi:10.1080/08946566.2016.1185985

Akalu, G. A., (2014). Interrogating the continuing professional development policy

framework in Ethiopia: A critical discourse analysis. *Professional Development

in Education*, *42*, 179-200. doi:10.1080/19415257.2014.940627

Albright, E. A., (2011). Policy change and learning in response to extreme flood events in

Hungary: An advocacy coalition approach. *Policy Studies Journal*, *39*, 485-511.

doi:10.1111/j.1541-0072.2011.00418.x

Alon, S., & Berg-Warman, A. (2014). Treatment and prevention of elder abuse and
neglect: Where knowledge and practice meet a model for intervention to prevent
and treat elder abuse in Israel. *Journal of Elder Abuse & Neglect, 26,* 150-171.
doi:10.1080/08946566.2013.784087

Anand, J., Begley, E., O'Brien, M., Taylor, B., & Killick, C. (2013). Conceptualising
elder abuse across local and global contexts: Implications for policy and
professional practice on the island of Ireland. *The Journal of Adult Protection, 15,*
280-289. doi:10.1108/jap-03-2013-0011

Anastas, J. W. (2004). Quality in qualitative evaluation: Issues and possible
answers. *Research on Social Work Practice, 14,* 57-65.
doi:10.1177/1049731503257870

Anderson, W. P. (2006). A procedure for coding self regard from narrative self
descriptions. *Psychological Reports*, *1*, 879-893. doi:10.2466/pro.99.3.879-893

Andrews, R. J., Logan, T. D., & Sinkey, M. J. (2015). Identifying confirmatory bias in
the field: Evidence from a poll of experts. *Journal of Sports Economics*, *1*, 1-32.
doi:10.1177/1527002515617511

Arino, A., LeBaron, C., & Milliken, F. J. (2016). Publishing qualitative research in
academy of management discoveries. *Academy of Management Discoveries*, *2,*
109-113. doi:10.5465/amd.2016.0034

Ayre, C., & Scally, A. J. (2013). Critical values for lawshes content validity ratio:
Revisiting the original methods of calculation. *Measurement and Evaluation in
Counseling and Development*, *47*, 79-86. doi:10.1177/0748175613513808

Bagshaw, D., Adams, V., Zannettino, L., & Wendt, S. (2015). Elder mediation and the financial abuse of older people by a family member. *Conflict Resolution Quarterly, 32,* 443-480. doi:10.1002/crq.21117

Balmer, D. F., Rama, J. A., Martimianakis, M. A., & Stenfors-Hayes, T. (2016). Using data from program evaluations for qualitative research. *Journal of Graduate Medical Education, 8,* 773-774. doi:10.4300/jgme-d-16-00540.1

Band-Winterstein, T. (2015). Health care provision for older persons: The interplay between ageism and elder neglect. *Journal of Applied Gerontology, 34,* 113-127. doi:10.1177/0733464812475308

Banks, G. C., Kepes, S., & Banks, K. P. (2012). Publication bias: The antagonist of meta analytic reviews and effective policymaking. *Educational Evaluation and Policy Analysis*, *34*, 259-277. doi:10.3102/0162373712446144

Barbieri, N. (2015). A narrative interactionist approach to policy change analysis: Lessons from a case study of the cultural policy domain in Catalonia. *Critical Policy Studies*, *9*, 434-453. doi:10.1080/19460171.2015.1014519

Barradell, S., & Peseta, T. (2017). Putting threshold concepts to work in health sciences: Insights for curriculum design from a qualitative research synthesis. *Teaching in Higher Education, 22,* 349-372. doi:10.1080/13562517.2016.1248390

Beach, S. R., Schulz, R., & Sneed, R. (2016). Associations between social support social networks and financial exploitation in older adults. *Journal of Applied Gerontology, 1,* 1-22. doi:10.1177/0733464816642584

Bedford Borough Council. (2017). *What is abuse.* Retrieved from

http://www.bedford.gov.uk/health_and_social_care/help_for_

adults/safeguarding_adults/what_is_abuse.aspx

Bene, C., Mehta, L., McGranahan, G., Cannon, T., Gupte, J., & Tanner, T. (2017).

Resilience as a policy narrative: Potentials and limits in the context of urban

planning. *Climate and Development*, *1*, 1-18.

doi:10.1080/17565529.2017.1301868

Biggs, S., & Haapala, I. (2013). Elder mistreatment, ageism, and human rights.

International Psychogeriatrics, 25, 1299-1306.

doi:10.1017/s1041610212002372

Birchfield, V. (2013). A normative power Europe framework of transnational policy

formation. *Journal of European Public Policy*, *20*, 907-922.

doi:10.1080/13501763.2013.781829

Blair, B. D., & McCormack, L. (2016). Applying the narrative policy framework to the

issues surrounding hydraulic fracturing within the news media: A research

note. *Research & Politics*, *3*, 1-3. doi:10.1177/2053168016628334

Blakely, H., & Moles, K. (2017). Interviewing in the interview society: Making visible

the biographical work of producing accounts for interviews. *Qualitative

Research*, *17*, 159-172. doi:10.1177/1468794116686825

Bollich, K. L., Rogers, K. H., & Vazire, S. (2015). Knowing more than we can tell:

People are aware of their biased self perceptions. *Personality and Social

Psychology Bulletin*, *41*, 918-929. doi:10.1177/0146167215583993

Borgatta, L., Kaufman, D., Kelly, J. P., Babaian, D., & Banks, M. (2017). Applications for research concerning fetal or placental tissue and expected institutional review board responses. *Journal of Empirical Research on Human Research Ethics*, *12*, 150-160. doi:10.1177/1556264617703893

Borras, S., & Jordana, J. (2016). When regional innovation policies meet policy rationales and evidence: A plea for policy analysis. *European Planning Studies*, *24*, 2133-2153. doi:10.1080/09654313.2016.1236074

Boswell, C., Geddes, A., & Scholten, P. (2011). The role of narratives in migration policy making: A research framework. *The British Journal of Politics and International Relations*, *13*, 1-11. doi:10.1111/j.1467-856x.2010.00435.x

Boye, F., & Yan, E. (2016). Abuse of older persons with dementia: A review of the literature. *Trauma Violence, & Abuse, 1,* 1-21. doi:10.1177/1524838016650185

Bradbury-Jones, C., Taylor, J., & Herber, O. (2014). How theory is used and articulated in qualitative research: Development of a new typology. *Social Science & Medicine, 120*, 135-141. doi:10.1016/j.socscimed.2014.09.014

Brake, E. (2015). Fair care: Elder care and distributive justice. *Politics, Philosophy and Economics, 16,* 1-20. doi:10.1177/1470594x15600831

Breen, F. (2016). Australian immigration policy in practice: A case study of skill recognition and qualification transferability amongst Irish 457 visa holders. *Australian Geographer*, *47*, 491-509. doi:10.1080/00049182.2016.1220895

Bridges-Rhoads, S., & Van Cleave, J. (2014). Pursuing responsibility: Writing and citing subjects in qualitative research. *Qualitative Inquiry, 20,* 641-652. doi:10.1177/1077800413513724

Broom, A., Cheshire, L., & Emmison, M. (2009). Qualitative researchers understandings of their practice and the implications for data archiving and sharing. *Sociology, 43,* 1163-1180. doi:10.1177/0038038509345704

Browne, C. V., & Braun, K. L. (2001). When a case management program closes: Impact as perceived by frail elders and their family caregivers. *Journal of Applied Gerontology, 20,* 338-355. doi:10.1177/073346480102000306

Brownell, P. (2016). A reflection on gender issues in elder abuse research: Brazil and Portugal. *Ciencia & Saude Coletiva, 21,* 3323-3330. doi:10.1590/1413-812320152111.23142016

Brozowski, K., & Hall, D. R. (2010). Aging and risk: Physical and sexual abuse of elders in Canada. *Journal of Interpersonal Violence, 25,* 1183-1199. doi:10.1177/0886260509340546

Brutus, S., Aguinis, H., & Wassmer, U. (2013). Self reported limitations and future directions in scholarly reports: Analysis and recommendations. *Journal of Management*, *39*, 48-75. doi:10.1177/0149206312455245

Bryman, A. (2004). Qualitative research on leadership: A critical but appreciative review. *Leadership Quarterly*, *15*, 729-769. doi:10.1016/j.leaqua.2004.09.007

Buchbinder, E. (2010). Beyond checking: Experiences of the validation interview.

Qualitative Social Work: Research and Practice, *10*, 106-122.

doi:10.1177/1473325010370189

Burchett, H. E., Dobrow, M. J., Lavis, J. N., & Mayhew, S. H. (2017). The applicability

and transferability of public health research from one setting to another: A survey

of maternal health researchers. *Global Health Promotion*, *20*, 16-24.

doi:10.1177/17557975913476904

Burke, G. (2017). Commentary: Improving the content validity of research

instruments. *Journal of Human Lactation*, *33*, 48-49.

doi:10.1177/0890334416679789

Burnes, D., Pillemer, K., & Lachs, M. S. (2016). Elder abuse severity: A critical but

understudied dimension of victimization for clinicians and researchers.

Gerontologist, 57, 1-12 doi:10.1093/geront/gnv688

Burnett, J., Achenbaum, W. A., & Murphy, K. P. (2014). Prevention and early

identification of elder abuse. *Clinics in Geriatric Medicine, 30,* 743-759.

doi:10.1016/j.cger.2014.08.013

Burnett, J., Dyer, C. B., Booker, J. G., Flores, D. V., Green, C. E., & Diamond, P. M.

(2014). Community based risk assessment of elder mistreatment and self neglect:

Evidence of construct validity and measurement invariance across gender and

ethnicity. *Journal of The Society for Social Work and Research*, *5*, 291-319.

doi:10.1086/677654

Burnett, J., Jackson, S .L., Sinha, A. K., Aschenbrenner, A. R., Murphy, K. P., Xia, R., &

Diamond, P. M. (2016). Five year all cause mortality rates across five categories

of substantiated elder abuse occurring in the community. *Journal of Elder Abuse & Neglect, 28,* 59-75. doi:10.1080/08946566.2016.1142920

Butler, A. E., Copnell, B., & Hall, H. (2017). Researching people who are bereaved: Managing risks to participants and researchers. *Nursing Ethics*, *1*, 1-11. doi:10.1177/0969733017695656

Buzgova, R., & Ivanova, K. (2011). Violation of ethical principles in institutional care for older people. *Nursing Ethics, 18,* 64-78. doi:10.1177/0969733010385529

Cadmus, E. O., Owoaje, E. T., & Akinyemi, O. O. (2015). Older persons views and experience of elder abuse in South Western Nigeria. *Journal of Aging and Health, 27,* 711-729. doi:10.1177/0898264314559893

Cairns, J., & Vreugdenhil, A. (2013). Working at the frontline in cases of elder abuse: It keeps me awake at night. *Australasian Journal on Ageing*, *33*, 59-62. doi:10.1111/ajag.12017

Camfield, L., & Palmer-Jones, R. (2013). Improving the quality of development research: What could archiving qualitative data for reanalysis and revisiting research sites contribute. *Progress in Development Studies, 13,* 323-338. doi:10.1177/1464993413490481

Campbell, J. L., Quincy, C., Osserman, J., & Pedersen, O. K. (2013). Coding in depth semi structured interviews: Problems of unitization and intercoder reliability and agreement. *Sociological Methods & Research*, *42*, 294-320. doi:10.1177/0049124113500475

Cannell, M. B., Jetelina, K. K., Zavadsky, M., & Reingle Gonzalez, J. M. (2016).

    Towards the development of a screening tool to enhance the detection of elder

    abuse and neglect by   emergency medical technicians: A qualitative study. *Bio*

    Med Central Emergency Medicine, 16, 1-10. doi:10.1186/s12873-016-0084-3

Cannell, M. B., Manini, T., Spence-Almaguer, E., Maldonado-Molina, M., & Andresen,

    E. M. (2014). United States population estimates and correlates of sexual abuse of

    community dwelling older adults. *Journal of Elder Abuse & Neglect, 26,* 398-413.

    doi:10.1080/08946566.2013.879845

Carmody, J., Traynor, V., & Marchetti, E. (2015). Barriers to qualitative dementia

    research: The elephant in the room. *Qualitative Health Research, 25,* 1013-1019.

    doi:10.1177/1049732314554099

Carmona-Torres, J. M., Lopez-Soto, P. J., Coimbra-Roca, A. I., Galvez-Rioja, R. M.,

    Goergen, T., & Rodríguez-Borrego, M. A. (2015). Elder abuse in a developing

    area in Bolivia. *Journal of Interpersonal Violence*, *1*, 1-8.

    doi:10.1177/0886260515608803

Castro, R. (2012). Inconsistent respondents and sensitive questions. *Field Methods*, *25*,

    283-298. doi:10.1177/1525822x12466988

Cavieres-Fernandez, E. (2017). Teacher counter stories to a citizenship education mega

    policy narrative: Preparing for citizenship in Chile. *Journal of Curriculum*

    Studies, *49*, 414-436. doi:10.1080/00220272.2016.1274783

Centers for Disease Control and Prevention. (2017). *Elder abuse: Definitions.* Retrieved

    from http://www.cdc.gov/violenceprevention/elderabuse/definitions.html

Chan, E., & Ross, V. (2014). Narrative understandings of a school policy: Intersecting student, teacher, parent and administrator perspectives. *Journal of Curriculum Studies*, *46*, 656-675. doi:10.1080/00220272.2014.911352

Chane, S., & Adamek, M. E. (2015a). Death is better than misery: Elders account of abuse and neglect in Ethiopia. *International Journal of Aging & Human Development, 82,* 54-78. doi:10.1177/0091415015624226

Chane, S., & Adamek, M. E. (2015b). Factors contributing to elder abuse in Ethiopia. *Journal of Adult Protection, 17,* 99-110. doi:10.1108/jap-07-2014-0026

Chang, E. S., Simon, M. A., & Dong, X. (2016). Using community based participatory research to address Chinese older womens health needs: Toward sustainability. *Journal of Women & Aging, 28,* 276-284. doi:10.1080/08952841.2014.950511

Choi, M., Brownell, P., & Moldovan, S. I. (2017). International movement to promote human rights of older women with a focus on violence and abuse against older women. *International Social Work, 60,* 170-181. doi:10.1177/0020872814559562

Choi, N. G., & Mayer, J. (2000). Elder abuse, neglect, and exploitation: Risk factors and prevention strategies. *Journal of Gerontological Social Work, 33,* 5-25. doi:10.1300/j083v33n02_02

Chokkanathan, S. (2015). Elder mistreatment and health status of rural older adults. *Journal of Interpersonal Violence, 30,* 3267-3282. doi:10.1177/0886260514555014

Choo, W. Y., Hairi, N. N., Sooryanarayana, R., Yunus, R. M., Hairi, F. M., & Ismail, N.,
…Bulgiba, A. (2016). Elder mistreatment in a community dwelling population:
the Malaysian elder mistreatment project cohort study protocol. *British Medical
Journal Open, 6,* 1-12. doi:10.1136/bmjopen-2016-011057

Christensen, G. (2016). A poststructuralist view on students project groups: Possibilities
and limitations. *Psychology Learning & Teaching*, *15,* 168-179.
doi:10.1177/1475725716643925

Ciomaga, B. (2013). Diversity in the national basketball association: A narrative policy
analysis. *International Journal of Sport Policy and Politics*, *6*, 491-511.
doi:10.1080/19406940.2013.839955

Cohen, M. (2013). The process of validation of a three dimensional model for the
identification of abuse in older adults. *Archives of Gerontology and
Geriatrics*, *57*, 243-249. doi:10.1016/j.archger.2013.06.009

Constantinou, C. S., Georgiou, M., & Perdikogianni, M. (2017). A comparative method
for themes saturation in qualitative interviews. *Qualitative Research*, *17*, 571-588.
doi:10.1177/1468794116686650

Cook, B. G. (2014). A call for examining replication and bias in special education
research. *Remedial and Special Education*, *35*, 233-246.
doi:10.1177/0741932514528995

Cooley, D. R. (2015). Elder abuse and vulnerability: Avoiding illicit paternalism in
healthcare, medical research, and life. *Ethics, Medicine and Public Health*, *1*,
102-112. doi:10.1016/j.jemep.2014.09.003

Cooper, C., Dow, B., Hay, S., Livingston, D., & Livingston, G. (2013). Care workers abusive behavior to residents in care homes: a qualitative study of types of abuse, barriers, and facilitators to good care and development of an instrument for reporting of abuse anonymously. *International Psychogeriatrics*, *25*, 733-741. doi:10.1017/s104161021200227x

Correa, F. P. (2013). The evaluation of qualitative research: A reflection from a justice perspective. *Qualitative Inquiry, 19,* 209-218. doi:10.1177/1077800412466225.

Corti, L., & Fielding, N. (2016). Opportunities from the digital revolution: Implications for researching, publishing, and consuming qualitative research. *SAGE Open*, *6*, 1-13. doi:10.1177/2158244016678912

Corti, L., Fielding, N., & Bishop, L. (2016). Editorial for special edition digital representations: Re using and publishing digital qualitative data. *SAGE Open*, *6*, 1-3. doi:10.1177/2158244016678911

Cramer, E. P., & Brady, S. R. (2013). Competing values in serving older and vulnerable adults: Adult protective services, mandated reporting, and domestic violence programs. *Journal of Elder Abuse & Neglect*, *25*, 453-468. doi:10.1080/08946566.2013.782781

Creswell, J. W. (2012). *Qualitative inquiry and research design: Choosing among five approaches* (3rd ed.). Thousand Oaks: CA: Sage.

Daly, J., & Jogerst, G. (2013). Multidisciplinary team legislative language associated with elder abuse investigations. *Journal of Elder Abuse & Neglect*, *26*, 44-59. doi:10.1080/08946566.2013.782783

Daniels, J., Angleman, A., & Grinnan, E. (2015). Standardizing research methods on

    violent offenders: Perpetrator motive research design and consensual qualitative

    research. *Aggression and Violent Behavior*, *21*, 125-132.

    doi:10.1016/j.avb.2015.02.001

Day, M. R., Leahy-Warren, P., & McCarthy, G. (2016). Self neglect: Ethical

    considerations. *Annual Review of Nursing Research, 34,* 89-107.

    doi:10.1891/0739-6686.34.89

Day, M. R., Mulcahy, H., & Leahy-Warren, P. (2016). Prevalence of self neglect in the

    caseloads of public health nurses. *British Journal of Community Nursing, 21,*

    31-35. doi:10.12968/bjcn.2016.21.1.31

DeBruin, A., Treccani, B., & Sala, S. D. (2014). Cognitive advantage in bilingualism: An

    example of publication bias. *Psychological Science*, *26*, 99-107.

    doi:10.1177/0956797614557866

DeDonder, L., Lang, G., Ferreira-Alves, J., Penhale, B., Tamutiene, I., & Luoma, M.

    (2016). Risk factors of severity of abuse against older women in the home setting:

    A multinational european study. *Journal of Women & Aging, 28,* 540-554.

    doi:10.1080/08952841.2016.1223933

DeLiema, M., Navarro, A., Enguidanos, S., & Wilber, K. (2015). Voices from the

    frontlines: Examining elder abuse from multiple professional perspectives. *Health

    & Social Work*, *40*, 15-e4. doi:10.1093/hsw/hlv012

Desai, P., Nasa, P., Soo, J., Jia, C., Berbaum, M. L., Fischer, J. H., & Johnson, T. P.

(2017). Effects of regulatory support services on institutional review board turnaround times. *Journal of Empirical Research on Human Research Ethics*, *12*, 131-139. doi:10.1177/1556264617704294

Devotta, K., Woodhall-Melnik, J., Pedersen, C., Wendaferew, A., Dowbor, T. P., Guilcher, S. J., … Matheson, F. I. (2016). Enriching qualitative research by engaging peer interviewers: A case study. *Qualitative Research, 16,* 661-680. doi:10.1177/1468794115626244

Dickson-Swift, V., James, E. L., Kippen, S., & Liamputtong, P. (2007). Doing sensitive research: What challenges do qualitative researchers face. *Qualitative Research, 7,* 327-353. doi:10.1177/1468794107078515

Dickson-Swift, V., James, E. L., Kippen, S., & Liamputtong, P. (2009). Researching sensitive topics: Qualitative research as emotion work. *Qualitative Research, 9,* 61-79. doi:10.1177/1468794108098031

Dodge, J. (2015). Indication and inference: Reflections on the challenge of mixing paradigms in the Narrative Policy Framework. *Critical Policy Studies*, *9*, 361-367. doi:10.1080/19460171.2015.1075735

Dong, X. Q. (2013). Elder abuse: Research practice and health policy: The 2012 Gerontological Society of America Maxwell Pollack award lecture. *The Gerontologist, 52,* 153-162. doi:10.1093/geront/gnt139

Dong, X. Q. (2015a). Elder abuse in Chinese populations: A global review. *Journal of Elder Abuse & Neglect, 27,* 196-232. doi:10.1080/08946566.2015.1039154

Dong, X. Q. (2015b). Elder abuse: Systematic review and implications for practice. *Journal of the American Geriatrics Society, 63,* 1214-1238. doi:10.1111/jgs.13454

Dong, X. Q. (2016). Sociodemographic and socioeconomic characteristics of elder self neglect in an United States Chinese aging population. *Archives of Gerontology & Geriatrics, 64,* 82-89. doi:10.1016/j.archger.2016.01.007

Dong, X. Q., & Wang, B. (2016). 2015 Rosalie wolf memorial award lecture: Past present and future of elder abuse. *Journal of Elder Abuse & Neglect, 28,* 345-365. doi:10.1080/08946566.2016.1237318

Dong, X. Q., Chen, R., & Simon, M. A. (2016). Elder mistreatment in United States community dwelling Chinese older women. *Violence Against Women, 22,* 1097-1112. doi:10.1177/1077801215618804

Dong, X. Q., Chen, R., Chang, E., & Simon, M. A. (2013). Elder abuse and psychological well being: A systematic review and implications for research and policy a mini review. *Gerontology, 59,* 132-142. doi:10.1159/000341652

Dong, X. Q., Chen, R., Fulmer, T., & Simon, M. A. (2014). Prevalence and correlates of elder mistreatment in a community dwelling population of United States Chinese older adults. *Journal of Aging and Health, 26,* 1209-1224. doi:10.1177/0898264314531617

Dong, X. Q., Simon, M., & Evans, D. (2013). Elder self neglect is associated with increased risk for elder abuse in a community dwelling population. *Journal of Aging and Health, 25,* 80-96. doi:10.1177/0898264312467373

Dong, X.Q., Simon, M., & Evans, D. (2014). A population based study of physical

    function and risk for elder abuse reported to social service agency: Findings from

    the Chicago health and aging project. *Journal of Applied Gerontology, 33,*

    808-830. doi:10.1177/0733464812459371

Doyle, E., & Buckley, P. (2017). Embracing qualitative research: A visual model for

    nuanced research ethics oversight. *Qualitative Research, 71,* 95-117.

    doi:10.1177/1468794116661230

Dressel, A., Schneider, R., DeNomie, M., Kusch, J., Welch, W., Sosa, M., … Bernstein,

    R. (2017). Assessing health promotion interventions: Limitations of traditional

    research methods in community based studies. *Health Promotion Practice*, *1*, 1-8.

    doi:10.1177/1524839917725489

Drisko, J. W. (2015). Teaching qualitative research: Key content course structures and

    recommendations. *Qualitative Social Work, 15,* 307-321.

    doi:10.1177/1473325015617522

Dunn, S. L., Arslanian-Engoren, C., DeKoekkoek, T., Jadack, R., & Scott, L. D. (2015).

    Secondary data analysis as an efficient and effective approach to nursing

    research. *Western Journal of Nursing Research*, *37*, 1295-1307.

    doi:10.1177/0193945915570042

East, R. (2015). Bias in the evaluation of research methods. *Marketing Theory*, *16*,

    219-231. doi:10.1177/1470593115609797

Eisikovits, Z., Koren, C., & Band-Winterstein, T. (2013). The social construction of social problems: The case of elder abuse and neglect. *International Psychogeriatrics*, *25*, 1291-1298. doi:10.1017/s1041610213000495

Ejaz, F. K., Rose, M., & Anetzberger, G. (2017). Development and implementation of online training modules on abuse, neglect, and exploitation. *Journal of Elder Abuse & Neglect, 29,* 73-101. doi:10.1080/08946566.2017.1307153

Elo, S., Kaariainen, M., Kanste, O., Polkki, T., Utriainen, K., & Kyngas, H. (2014). Qualitative content analysis: A focus on trustworthiness. *SAGE Open*, *4*, 1-10. doi:10.1177/2158244014522633

Ernst, J. S., Ramsey-Klawsnik, H., Schillerstrom, J. E., Dayton, C., Mixson, P., & Counihan, M. (2014). Informing evidence based practice: A Review of research analyzing adult protective services data. *Journal of Elder Abuse & Neglect*, *26*, 458-494. doi:10.1080/08946566.2013.832605

Ertas, N. (2015). Policy narratives and public opinion concerning charter schools. *Politics & Policy*, *43*, 426-451. doi:10.1111/polp.12120

Esarey, J., & Wu, A. (2016). Measuring the effects of publication bias in political science. *Research and Politics*, *3*, 1-9. doi:10.1177/2053168016665856

Etkind, S., Bristowe, K., Bailey, K., Selman, L., & Murtagh, F. (2017). How does uncertainty shape patient experience in advanced illness: A secondary analysis of qualitative data. *Palliative Medicine*, *31*, 171-180. doi:10.1177/0269216316647610

Fealy, G., Donnelly, N., Bergin, A., Treacy, M., & Phelan, A. (2013). Financial abuse of older people: A review. *National Centre for the Protection of Older People.* Retrieved from http://www.hdl.handle.net/10147/300701

Ferry, M., & Bachtler, J. (2013). Reassessing the concept of policy termination: The case of regional policy in England. *Policy Studies*, *34*, 255-273. doi:10.1080/01442872.2013.768389

Figueredo-Borda, N., & Yarnoz, A. Z. (2015). Perceptions of abuse in nursing home care relationships in Uruguay. *Journal of Transcultural Nursing, 26,* 164-170. doi:10.1177/1043659614526458

Findley, M. G., Jensen, N. M., Malesky, E. J., & Pepinsky, T. B. (2016). Can results free review reduce publication bias: The results and implications of a pilot study. *Comparative Political Studies*, *49*, 1667-1703. doi:10.1177/0010414016655539

Fisher, J. M., Rudd, M. P., Walker, R. W., & Stewart, J. (2016). Training tomorrows doctors to safeguard the patients of today: Using medical student simulation training to explore barriers to recognition of elder abuse. *Journal of the American Geriatrics Society, 64,* 168-173. doi:10.1111/jgs.13875

Fleming, T. R. (2015). Protecting the confidentiality of interim data: Addressing current challenges. *Clinical Trials*, *12*, 5-11. doi:10.1177/1740774514561243

Florczak, K. L., & Lockie, N. M. (2015). Institutional review board reformation: Is unfettered access the answer. *Nursing Science Quarterly*, *28*, 13-17. doi:10.1177/0894318414558621

Fraga, S., Lindert, J., Barros, H., Torres-González, F., Ioannidi-Kapolou, E., Melchiorre, M. G., … Soares, J. F. (2014). Elder abuse and socioeconomic inequalities: A multilevel study in seven european countries. *Preventive Medicine, 61,* 42-47. doi:10.1016/j.ypmed.2014.01.008

Frazao, S. L., Correia, A. M., Norton, P., & Magalhães, T. (2015). Physical abuse against elderly persons in institutional settings. *Journal of Forensic and Legal Medicine*, *36*, 54-60. doi:10.1016/j.jflm.2015.09.002

Freer, P. K. (2012). Parallel frames and policy narratives in music education and physical education. *Arts Education Policy Review*, *113*, 26-34. doi:10.1080/10632913.2012.626706

Friedman, L. S., Avila, S., Shah, M., Tanouye, K., & Joseph, K. (2014). A description of cases of severe physical abuse in the elderly and one year mortality. *Journal of Elder Abuse & Neglect*, *26*, 1-11. doi:10.1080/08946566.2013.780944

Fulmer, T., Rodgers, R. F., & Pelger, A. (2014). Verbal mistreatment of the elderly. *Journal of Elder Abuse & Neglect*, *26*, 351-364. doi:10.1080/08946566.2013.801817

Gagnon, K. L., DePrince, A. P., Srinivas, T., & Hasche, L. K. (2015). Perceptions of participation in trauma research among older adults. *Traumatology*, *21*, 237-243. doi:10.1037/trm0000032

Ganong, L., & Coleman, M. (2014). Qualitative research on family relationships. *Journal of Social and Personal Relationships*, *31*, 451-459. doi:10.1177/0265407514520828

Garbarski, D., Schaeffer, N. C., & Dykema, J. (2016). Interviewing practices, conversational practices, and rapport: Responsiveness and engagement in the standardized survey interview. *Sociological Methodology*, *46*, 1-38. doi:10.1177/0081175016637890

Garcia, B., Welford, J., & Smith, B. (2015). Using a smartphone app in qualitative research: The good the bad and the ugly. *Qualitative Research, 16,* 508-525. doi:10.1177/1468794115593335

Gatz, M., Smyer, M. A., & DiGilio, D. A. (2016). Psychologys contribution to the well being of older Americans. *American Psychologist, 71,* 257-267. doi:10.1037/a0040251

Gen, S., & Wright, A. C. (2013). Policy advocacy organizations: A framework linking theory and practice. *Journal of Policy Practice*, *12*, 163-193. doi:10.1080/15588742.2013.795477

Gerber, A. S., & Malhotra, N. (2008). Publication bias in empirical sociological research: Do arbitrary significance levels distort published results. *Sociological Methods & Research*, *37*, 3-30. doi:10.1177/0049124108318973

Gerber, A. S., Malhotra, N., Dowling, C. M., & Doherty, D. (2010). Publication bias in two Political behavior literatures. *American Politics Research*, *38*, 591-613. doi:10.1177/1532673x09350979

Gilbert, A., Stanley, D., Penhale, B., & Gilhooly, M. (2013). Elder financial abuse in England: A policy analysis perspective related to social care and banking. *The Journal of Adult Protection*, *15*, 153-163. doi:10.1108/jap-11-2012-0026

Glaser, J., Spencer, K., & Charbonneau, A. (2014). Racial bias and public policy. *Policy Insights from the Behavioral and Brain Sciences*, *1*, 88-94. doi:10.1177/2372732214550403

Goswami, S., & Sahhai, M. (2016). A study of morbidity pattern in elderly population. *European Researcher, 103,* 119-128. doi:10.13187/er.2016.103.119

Grace, M., Malone, J., & Murphy, A. (2016). Transferability of the youth foyer model for women exiting the criminal justice system. *Journal of Social Work*, *16*, 470-488. doi:10.1177/1468017315579306

Gray, G., & Jones, M. D. (2016). A qualitative narrative policy framework: Examining the policy narratives of United States campaign finance regulatory reform. *Public Policy and Administration*, *31*, 193-220. doi:10.1177/0952076715623356

Gutman, G. M., & Yon, Y. (2014). Elder abuse and neglect in disasters: Types, prevalence and research gaps. *International Journal of Disaster Risk Reduction*, *10*, 38-47. doi:10.1016/j.ijdrr.2014.06.002

Hall, S., Dodd, R. H., & Higginson, I. J. (2014). Maintaining dignity for residents of care homes: A qualitative study of the views of care home staff community nurses residents and their families. *Geriatric Nursing, 35,* 55-60. doi:10.1016/j.gerinurse.2013.10.012

Halvorsen, K., Almklov, P. G., & Gjosund, G. (2017). Fire safety for vulnerable groups: The challenges of cross sector collaboration in Norwegian municipalities. *Fire Safety Journal, 92,* 1-8. doi:10.1016/j.firesaf.2017.05.001

Hamby, S., Smith, A., Mitchell, K., & Turner, H. (2016). Poly victimization and resilience portfolios: Trends in violence research that can enhance the understanding and prevention of elder abuse. *Journal of Elder Abuse & Neglect, 28,* 217-234. doi:10.1080/08946566.2016.1232182

Hanley, N., Fileborn, B., Larcombe, W., Henry, N., & Powell, A. (2015). Improving the law reform process: Opportunities for empirical qualitative research. *Australian & New Zealand Journal of Criminology, 49,* 546-563. doi:10.1177/0004865815604195

Hansen, K., Gerbasi, M., Todorov, A., Kruse, E., & Pronin, E. (2014). People claim objectivity after knowingly using biased strategies. *Personality and Social Psychology Bulletin*, *40*, 691-699. doi:10.1177/0146167214523476

Hansen, M. C., Flores, D. V., Coverdale, J., & Burnett, J. (2015). Correlates of depression in self neglecting older adults: A cross sectional study examining the role of alcohol abuse and pain in increasing vulnerability. *Journal of Elder Abuse & Neglect, 28,* 41-56. doi:10.1080/08946566.2015.1136252

Harrison, B. A., & Mayo-Wilson, E. (2013). Trial registration: Understanding and preventing reporting bias in social work research. *Research on Social Work Practice*, *24*, 372-376. doi:10.1177/1049731513512374

Harrison, J. S., Banks, G. C., Pollack, J. M., O'Boyle, E. H., & Short, J. (2016). Publication bias in strategic management research. *Journal of Management*, *43*, 400-425. doi:10.1177/0149206314535438

Hayslip, B., Reinberg, J., & Williams, J. (2015). The impact of elder abuse education on young adults. *Journal of Elder Abuse & Neglect, 27,* 233-253. doi:10.1080/08946566.2014.1003264

Hennink, M., & Weber, M. B. (2013). Quality issues of court reporters and transcriptionists for qualitative research. *Qualitative Health Research*, 23, 700-710. doi:10.1177/1049732313481502

Hennink, M. M., Kaiser, B. N., & Marconi, V. C. (2017). Code saturation versus meaning saturation: How many interviews are enough. *Qualitative Health Research*, *27*, 591-608. doi:10.1177/1049732316665344

Horejes, T. (2013). Reconceptualizing disability policy frameworks. *Journal of Policy Practice*, *12*, 23-42. doi:10.1080/15588742.2013.739081

Horning, S. M., Wilkins, S. S., Dhanani, S., & Henriques, D. (2013). A case of elder abuse and undue influence. *Clinical Case Studies,12,* 373-387. doi:10.1177/1534650113496143

Hoskins, M. L., & White, J. (2013). Relational inquiries and the research interview: Mentoring future researchers. *Qualitative Inquiry, 19,* 179-188. doi:10.1177/1077800412466224

Hruschka, D. J., Schwartz, D., St.John, D. C., Picone-Decaro, E., Jenkins, R. A., & Carey, J. W. (2004). Reliability in coding open ended data: Lessons learned from human immunodeficiency virus behavioral research. *Field Methods*, *16*, 307-331. doi:10.1177/1525822x04266540

Hsieh, H., & Shannon, S. E. (2005). Three approaches to qualitative content

analysis. *Qualitative Health Research*, *15*, 1277-1288.

doi:10.1177/1049732305276687

Hunter, I., Haining Ede, G., & Whiddett, R. (2014). Increased electronic information

sharing by sexual health services: Confidentiality and consent. *Health Informatics

Journal*, *20*, 3-12. doi:10.1177/1460458212475140

Husmann, M. A. (2015). Social constructions of obesity target population: An empirical

look at obesity policy narratives. *Policy Sciences*, *48*, 415-442.

doi:10.1007/s11077-015-9229-6

Illinois Act on the Aging, 20 I.L.C.S.§ 105.

Illinois Department on Aging. (2007). *Illinois Department on Aging 2007 annual report.*

Retrieved from https://www.illinois.gov/aging/Resources/Documents/idoa_

report07.pdf

Illinois Department on Aging. (2008). *Illinois Department on Aging 2008 annual report.*

Retrieved from http://www.illinois.gov/aging/Resources/Documents/idoa_

report10.pdf

Illinois Department on Aging. (2010). *Illinois Department on Aging 2010 annual report.*

Retrieved from http://www.illinois.gov/aging/Resources/Documents/idoa_

report10.pdf

Illinois Department on Aging. (2017a). *Illinois Department on Aging fiscal year2017

proposed budget.* Retrieved from http://www.illinois.gov/aging/AboutUs/

Documents/FY17ProposedBudget.pdf

Illinois Department on Aging. (2017b). *State plan on aging for fiscal year 2017- fiscal year 2019.* Retrieved from http://www.illinois.gov/aging/resources/ documents/stateplanonaging.pdf

Illinois Department on Aging. (2018a). *About the Illinois department on aging.* Retrieved from http://www.illinois.gov/aging/AboutUs/Pages/default.aspx

Illinois Department on Aging. (2018b). *Adult protective services.* Retrieved from http://www.illinois.gov/aging/ProtectionAdvocacy/Pages/abuse.aspx

Illinois Department on Aging. (2018c). *Illinois area agencies on aging.* Retrieved from http://www.illinois.gov/aging/PartnersProviders/Pages/aaa-main.aspx

Illinois Department on Aging. (2018d). *Statutes and administrative rules.* Retrieved from http://www.illinois.gov/aging/AboutUs/Pages/rules-main.aspx

Iris, M., Conrad, K. J., & Ridings, J. (2014). Observational measure of elder self neglect. *Journal of Elder Abuse & Neglect*, *26*, 365-397. doi:10.1080/08946566.2013.801818

Irvine, A., Drew, P., & Sainsbury, R. (2012). Am I not answering your questions properly: Clarification, adequacy and responsiveness in semi structured telephone and face to face interviews. *Qualitative Research*, *13*, 87-106. doi:10.1177/1468794112439086

Irwin, S. (2013). Qualitative secondary data analysis: Ethics, epistemology and context. *Progress in Development Studies, 13,* 295-306. doi:10.1177/1464993413490479

Irwin, S., Bornat, J., & Winterton, M. (2012). Timescapes secondary analysis: Comparison, context and working across data sets. *Qualitative Research, 12,* 66-80. doi:10.1177/1468794111426234

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,* 265-285. doi:10.1177/0306624x14554063

Jackson, S. L. (2017). Adult protective services and victim services: A review of the literature to increase understanding between these two fields. *Aggression and Violent Behavior. 34,* doi:10.1016/j.avb.2017.01.010

Jackson, S. L., & Hafemeister, T. L. (2013). Enhancing the safety of elderly victims after the close of an adult protective services investigation. *Journal of Interpersonal Violence, 28,* 1223-1239. doi:10.1177/0886260512468241

Jackson, S. L., & Hafemeister, T. L. (2014). How case characteristics differ across four types of elder maltreatment: Implications for tailoring interventions to increase victim safety. *Journal of Applied Gerontology, 33,* 982-997. doi:10.1177/0733464812459370

Jackson, S. L., & Hafemeister, T. L. (2015). The impact of relationship dynamics on the detection and reporting of elder abuse occurring in domestic settings. *Journal of Elder Abuse & Neglect, 27,* 121-145. doi:10.1080/08946566.2015.1008085

Jackson, S. L., & Hafemeister, T. L. (2016). Theory based models enhancing the understanding of four types of elder maltreatment. *International Review of Victimology, 22,* 289-320. doi:10.1177/0269758016630887

James, B. D., Boyle, P. A., & Bennett, D. A. (2014). Correlates of susceptibility to scams in older adults without dementia. *Journal of Elder Abuse & Neglect*, *26*, 107-122. doi:10.1080/08946566.2013.821809

Jindal, B. A. K., Singh, M. G., & Pandya, M. K. (2015). Qualitative research in medicine: An art to be nurtured. *Medical Journal Armed Forces India, 71,* 369-372. doi:10.1016/j.mjafi.2014.11.006

Jirik, S., & Sanders, S. (2014). Analysis of elder abuse statutes across the United States 2011–2012. *Journal of Gerontological Social Work, 57,* 478-497 doi:10.1080/01634372.2014.884514

Jiwani, F. N., & Krawchenko, T. (2014). Public policy, access to government, and qualitative research practices: Conducting research within a culture of information control. *Canadian Public Policy*, *40*, 57-66. doi:10.3138/cpp.2012-051

Johansen, M. L. (2014). Conflicting priorities: Emergency nurses perceived disconnect between patient satisfaction and the delivery of quality patient care. *Journal of Emergency Nursing*, *40*, 13-19. doi:10.1016/j.jen.2012.04.013

Johnson, F. (2011). Problems with the term and concept of abuse: Critical reflections on the Scottish adult support and protection study. *British Journal of Social Work, 42,* 833-850. doi:10.1093/bjsw/bcr115

Jones, M. D. (2014). Communicating climate change: Are stories better than just the facts. *Policy Studies Journal*, *42*, 644-673. doi:10.1111/psj.12072

Jones, M. D., & McBeth, M. K. (2010). A narrative policy framework: Clear enough to be wrong. *Policy Studies Journal*, *38*, 329-353. doi:10.1111/j.1541-0072.2010.00364.x

Jones, M. D., & Radaelli, C. M. (2015). The narrative policy framework: child or monster. *Critical Policy Studies, 9,* 339-355. doi:10.1080/19460171.2015.1053959

Jones, M. D., & Radaelli, C. M. (2016). The narrative policy frameworks call for interpretivists. *Critical Policy Studies*, *10*, 117-120. doi:10.1080/19460171.2015.1111156

Jones, M. D., & Song, G. (2013). Making sense of climate change: How story frames shape cognition. *Political Psychology*, *35*, 447-476. doi:10.1111/pops.12057

Jongen, C. S., McCalman, J., & Bainbridge, R. G. (2017). The implementation and evaluation of health promotion services and programs to improve cultural competency: A systematic scoping review. *Frontiers in Public Health, 5, 1-14.* doi:10.3389/fpubh.2017.00024

Jonsen, K., Fendt, J., & Point, S. (2017). Convincing qualitative research: What constitutes persuasive writing. *Organizational Research Methods*, *1*, 1-38. doi:10.1177/1094428117706533

Jovanovic, G. (2011). Toward a social history of qualitative research. *History of the Human Sciences*, *24*, 1-27. doi:10.1177/0952695111399334

Jung, M. (2016). Challenges of multimorbidities in the era of an aging population. *The Health Care Manager, 35,* 134-143. doi:10.1097/hcm.0000000000000106

Kamavarapu, Y. S., Ferriter, M., Morton, S., & Vollm, B. (2017). Institutional abuse Characteristics of victims perpetrators and organsations: A systematic review. *European Psychiatry, 40,* 45-54. doi:10.1016/j.eurpsy.2016.07.002

Kaplan, D. B., & Pillemer, K. (2015). Fulfilling the promise of the elder justice act: Priority goals for the white house conference on aging. *Public Policy & Aging Report, 25,* 63-66. doi:10.1093/ppar/prv001

Kepes, S., Banks, G., McDaniel, M., & Whetzel, D. (2012). Publication bias in the organizational sciences. *Organizational Research Methods*, *15*, 624-662. doi:10.1177/1094428112452760

Khalili, Z., Taghadosi, M., Gilasi, H., & Sadrollahi, A. (2016). The prevalence of elder abuse and associated factors among the elderly in Kashan city, Iran. *Journal of Basic Research in Medical Sciences, 3,* 26-34. doi:10.18869/acadpub.jbrms.3.2.26

Khanassov, V., Pluye, P., Descoteaux, S., Haggerty, J. L., Russell, G., Gunn, J., & Levesque, J. (2016). Organizational interventions improving access to community based primary health care for vulnerable populations: A scoping review. *International Journal for Equity in Health, 15,* 1-34. doi:10.1186/s12939-016-0459-9

King, R., Lulle, A., Sampaio, D., & Vullnetari, J. (2016). Unpacking the ageing

migration nexus and challenging the vulnerability trope. *Journal of Ethnic and Migration Studies, 43,*182-198. doi:10.1080/1369183x.2016.1238904

Kiyimba, N., & O'Reilly, M. (2016). The risk of secondary traumatic stress in the

qualitative transcription process: A research note. *Qualitative Research, 16,*

468-476. doi:10.1177/1468794115577013

Kliman, A. (2015). Income inequality, managers compensation and the falling rate of

profit: Reconciling the United States evidence. *Capital & Class*, *39*, 287-320.

doi:10.1177/0309816815587077

Koch, L. C., Niesz, T., & McCarthy, H. (2013). Understanding and reporting qualitative

research: An analytical review and recommendations for submitting

authors. *Rehabilitation Counseling Bulletin, 57,* 131-143.

doi:10.1177/0034355213502549

Korstjens, I., & Moser, A. (2017). Practical guidance to qualitative research part 4:

Trustworthiness and publishing. *European Journal of General Practice*, *24*, 120-

124. doi:10.1080/13814788.2017.1375092

Kosberg, J. I. (2014). Rosalie wolf memorial lecture: Reconsidering assumptions

regarding men as elder abuse perpetrators and as elder abuse victims. *Journal of*

Elder Abuse & Neglect, 26, 207-222. doi:10.1080/08946566.2014.898442

Kozleski, E. B. (2017). The uses of qualitative research: Powerful methods to inform

evidence based practice in education. *Research & Practice for Persons with*

Severe Disabilities, 42, 19-32. doi:10.1177/1540796916683710

Kromrey, J. D., & Rendina-Gobioff, G. (2006). On knowing what we do not know. *Educational and Psychological Measurement*, *66*, 357-373. doi:10.1177/0013164405278585

Kuchler, M., & Lovbrand, E. (2015). Simulative governance: On the collaborative narrative of civil society participation in the clean development mechanism stakeholder framework. *Environmental Politics*, *25*, 434-453. doi:10.1080/09644016.2015.1102352

Kwak, J., Kramer, B. J., Lang, J., & Ledger, M. (2012). Challenges in end of life care management for low income frail elders: A case study of the Wisconsin family care program. *Research on Aging, 35,* 393-419. doi:10.1177/0164027512446939

Landrine, H., Corral, I., Hall, M. B., Bess, J. J., & Efird, J. (2016). Self rated health, objective health, and racial discrimination among African Americans: Explaining inconsistent findings and testing health pessimism. *Journal of Health Psychology*, *21*, 2514-2524. doi:10.1177/1359105315580465

Landrock, U. (2017). Investigating interviewer falsifications: A quasi experimental design. *Bulletin De Methodologie Sociologique*, *136*, 5-20. doi:10.1177/0759106317725640

Lang, G., De Donder, L., Penhale, B., Ferreira-Alves, J., Tamutiene, I., & Luoma, M. L. (2014). Measuring older adults abuse: Evaluation of formative indicators to promote brevity. *Educational Gerontology*, *40*, 531-542. doi:10.1080/03601277.2013.857892

Lawton, R. N., & Rudd, M. A. (2014). A narrative policy approach to environmental

conservation. *Ambio, 43,* 849-857. doi:10.1007/s13280-014-0497-8

Leal, D. L., & Hess, F. M. (1999). Survey bias on the front porch: Are all subjects interviewed equally. *American Politics Quarterly*, *27*, 468-487. doi:10.1177/1532673x99027004005

Lee, H. Y., & Lightfoot, E. (2014). The culture embedded social problem of elder mistreatment: A review of international literature on Asian elders. *Journal of Aggression, Maltreatment & Trauma*, *23*, 5-19. doi:10.1080/10926771.2014.864743

Lee, Y. S., Kaplan, C. P,, & Perez-Stable, E. J. (2014). Elder mistreatment among Chinese and Korean immigrants: The roles of sociocultural contexts on perceptions and help seeking behaviors. *Journal of Aggression, Maltreatment & Trauma*, *23*, 20-44. doi:10.1080/10926771.2014.864741

Legramante, J. M., Morciano, L., Lucaroni, F., Gilardi, F., Caredda, E., & Pesaresi, A., … Palombi, L. (2016). Frequent use of emergency departments by the elderly population when continuing care is not well established. *Plos One, 11,* 1-11. doi:10.1371/journal.pone.0165939

Lichtenberg, P. A., Stoltman, J., Ficker, L. J., Iris, M., & Mast, B. (2015). A person centered approach to financial capacity assessment: Preliminary development of a new rating scale. *Clinical Gerontologist*, *38*, 49-67. doi:0.1080/07317115.2014.970318

Lin, M. C., & Giles, H. (2013). The dark side of family communication: A

    communication model of elder abuse and neglect. *International*

    Psychogeriatrics, *25*, 1275-1290. doi:10.1017/s1041610212002347

Liu, M., Wang, X., Yang, C., Jiang, Z., & Li, Y. (2017). An efficient secure internet of

    things data storage auditing protocol with adjustable parameter in cloud

    computing. *International Journal of Distributed Sensor Networks*, *13*, 1-11.

    doi:10.1177/1550147716686579

Loosveldt, G., & Beullens, K. (2014). A procedure to assess interviewer effects on

    nonresponse bias. *SAGE Open*, *4*, 1-12. doi:10.1177/2158244014526211.

Lowman, J., & Palys, T. (2014). The betrayal of research confidentiality in British

    sociology. *Research Ethics*, *10*, 97-118. doi:10.1177/1747016113481145

Lund, R., Nielsen, L. S., Henriksen, P. W., Schmidt, L., Avlund, K., & Christensen, U.

    (2014). Content validity and reliability of the copenhagen social relations

    questionnaire. *Journal of Aging and Health*, *26*, 128-150.

    doi:10.1177/0898264313510033

Lunnay, B., Borlagdan, J., McNaughton, D., & Ward, P. (2015). Ethical use of social

    media to facilitate qualitative research. *Qualitative Health Research, 25,* 99-109.

    doi:10.1177/1049732314549031

Lybecker, D. L., McBeth, M. K., Husmann, M. A., & Pelikan, N. (2015). Do new media

    support new policy narratives: The social construction of the United States and

    Mexico border on youtube. *Policy & Internet*, *7*, 497-525. doi:10.1002/poi3.94

MacPhail, C., Khoza, N., Abler, L., & Ranganathan, M. (2016). Process guidelines for establishing intercoder reliability in qualitative studies. *Qualitative Research, 16,* 198-212. doi:10.1177/1468794115577012

Malterud, K. (2001). Qualitative research: Standards, challenges, and guidelines. *The Lancet*, *358*, 483-488. doi:10.1016/s0140-6736(01)05627-6

Mancuso, C. A., Lee, S. K., Dy, C. J., Landers, Z. A., Model, Z., & Wolfe, S. W. (2015). Expectations and limitations due to brachial plexus injury: A qualitative study. *Hand*, *10*, 741-749. doi:10.1007/s11552-015-9761-z

Mann, M. J., Yanson, R., & Lambert, A. D. (2017). Using service learning to improve interviewer and interviewee effectiveness. *Management Teaching Review*, *1*, 1-17. doi:10.1177/2379298117697698

Manning, J., & Kunkel, A. (2014). Making meaning of meaning making research: Using qualitative research for studies of social and personal relationships. *Journal of Social and Personal Relationships, 31,* 433-441. doi:10.1177/0265407514525890

Manthorpe, J. (2015). The abuse neglect and mistreatment of older people with dementia in care homes and hospitals in England: The potential for secondary data analysis innovative practice. *Dementia, 14,* 273-279. doi:10.1177/1471301214541177

Manthorpe, J., Samsi, K., & Rapaport, J. (2012). Responding to the financial abuse of people with dementia: A qualitative study of safeguarding experiences in England. *International Psychogeriatrics, 24,* 1454-1464. doi:10.1017/s1041610212000348

Mariam, L. M., McClure, R., Robinson, J. B., & Yang, J. A. (2014). Eliciting change in

at risk elders: Evaluation of an elder abuse intervention program. *Journal of Elder*

Abuse & Neglect, 27, 19-33. doi:10.1080/08946566.2013.867241

Maroof, M., Ahmad, A., Khalique, N., & Ansari, M. A. (2016). Awareness of geriatric

welfare services among rural elderly population. *International Journal of*

Research in Medical   Sciences, 4, 2783-2787.

doi:10.18203/2320-6012.ijrms20161950

Martz, K., & Morse, J. M. (2016). The changing nature of guilt in family caregivers:

Living through care transitions of parents at the end of life. *Qualitative Health*

Research, 27, 1-17. doi:10.1177/1049732316649352

Masny, D. (2016). Problematizing qualitative research: Reading a data assemblage with

rhizoanalysis. *Qualitative Inquiry, 22,* 666-675. doi:10.1177/1532708616636744.

Maxwell, J. (2012). *Qualitative research design: An interactive approach* (3rd ed.).

Thousand Oaks: CA: Sage.

McClintock, M. K., Dale, W., Laumann, E. O., & Waite, L. (2016). Empirical

redefinition of comprehensive health and well being in the older adults of the

United States. *Proceedings of the National Academy of Sciences, 113,* 3071-3080.

doi:10.1073/pnas.1514968113

McGarry, J., & Ali, P. (2016). Researching domestic violence and abuse in healthcare

settings: Challenges and issues. *Journal of Research in Nursing, 21,* 465-476.

doi:10.1177/1744987116650923

McShane, B., Bockenholt, U., & Hansen, K. T. (2016). Adjusting for publication bias in meta analysis: An evaluation of selection methods and some cautionary notes. *Perspectives on Psychological Science*, *11*, 730-749. doi:10.1177/1745691616662243

Mears, D. P., Reisig, M. D., Scaggs, S., & Holtfreter, K. (2014). Efforts to reduce consumer fraud victimization among the elderly: The effect of information access on program awareness and contact. *Crime & Delinquency, 62,* 1235-1259. doi:10.1177/0011128714555759

Melchiorre, M. G., Penhale, B., & Lamura, G. (2014). Understanding elder abuse in Italy: Perception and prevalence types and risk factors from a review of the literature. *Educational Gerontology, 40,* 909-931. doi:10.1080/03601277.2014.912839

Melkas, T. (2013). Health in all policies as a priority in finish health policy: A case study on national health policy development. *Scandinavian Journal of Public Health*, *41*, 3-28. doi:10.1177/1403494812472296

Meyrick, J. (2006). What is good qualitative research: A first step towards a comprehensive approach to judging rigour quality. *Journal of Health Psychology*, *11*, 799-808. doi:10.1177/1359105306066643

Mikton, C., Maguire, H., & Shakespeare, T. (2014). A systematic review of the effectiveness of interventions to prevent and respond to violence against persons with disabilities. *Journal of Interpersonal Violence*, *29*, 3207-3226. doi:10.1177/0886260514534530

Milat, A. J., & Li, B. (2017). Narrative review of frameworks for translating research

    evidence into policy and practice. *Public Health Research & Practice, 27,* 1-13.

    doi:10.17061/phrp2711704

Molyneux, J. (2016). The top health care news story of 2015: Continuing gaps in health

    care access services for the most vulnerable Americans. *American Journal of*

    Nursing, 116, 14-15. doi:10.1097/01.naj.0000476151.96143.c4

Momtaz, Y. A., Hamid, T. A., & Ibrahim, R. (2013). Theories and measures of elder

    abuse. *Psychogeriatrics, 13,* 182-188. doi:10.1111/psyg.12009

Monteverde, S. (2014). Caring for tomorrows workforce: Moral resilience and healthcare

    ethics education. *Nursing Ethics, 23,* 104-116. doi:10.1177/0969733014557140.

Morris, M. C., & Morris, J. Z. (2016). The importance of virtue ethics in the institutional

    review board. *Research Ethics*, *12*, 201-216. doi:10.1177/1747016116656023

Morse, J. M. (2015). Critical analysis of strategies for determining rigor in qualitative

    inquiry. *Qualitative Health Research*, *25*, 1212-1222.

    doi:10.1177/1049732315588501

Morse, J. M., Barrett, M., Mayan, M., Olson, K., & Spiers, J. (2002). Verification

    strategies for establishing reliability and validity in qualitative research.

    International Journal of Qualitative Methods, *1*, 13-22.

    doi:10.1177/160940690200100202

Mosqueda, L., Wiglesworth, A., Moore, A. A., Nguyen, A., Gironda, M., & Gibbs, L.

    (2015). Variability in findings from adult protective services investigations of

elder abuse in California. *Journal of Evidence Informed Social Work, 13,* 34-44.
doi:10.1080/15433714.2014.939383

Mukhopadhyay, S., & Gupta, R. K. (2014). Survey of qualitative research methodology
in strategy research and implication for Indian researchers. *Vision: Journal of
Business Perspective, 18,* 109-123. doi:10.1177/0972262914528437

Nakanishi, M., Nakashima, T., Sakata, N., Tsuchiya, N., & Takizawa, K. (2013).
Community based system reports and substantiated cases of elder abuse:
Disparities between municipalities and relating factors in Japan. *Journal of Aging
& Social Policy, 25,* 234-247. doi:10.1080/08959420.2013.793086

Nakrem, S., Vinsnes, A. G., & Seim, A. (2011). Residents experiences of interpersonal
factors in nursing home care: A qualitative study. *International Journal of
Nursing Studies, 48,* 1357-1366. doi:10.1016/j.ijnurstu.2011.05.012

National Council of Nonprofits. (2017). *What is a nonprofit. Retrieved.* from
http://www.councilofnonprofits.org/what-is-a-nonprofit

Naughton, C., Drennan, J., Lyons, I., & Lafferty, A. (2013). The relationship between
older peoples awareness of the term elder abuse and actual experiences of elder
abuse. *International Psychogeriatrics*, *25*, 1257-1266.
doi:10.1017/s1041610213000513

Nayak, S., Mohapatra, M. K., & Panda, B. (2019). Prevalence of and factors contributing
to anxiety, depression and cognitive disorders among urban elderly in Odisha: A
study through the health systems lens. *Archives of Gerontology and
Geriatrics*, *80*, 38-45. doi:10.1016/j.archger.2018.09.008

Newman, A., & McNamara, Y. (2016). Teaching qualitative research and participatory

    practices in neoliberal times. *Qualitative Social Work, 15,* 428-443.

    doi:10.1177/1473325015624500

Newquist, D. D., DeLiema, M., & Wilber, K. H. (2015). Beware of data gaps in home

    care research. *Medical Care Research and Review*, *72*, 622-640.

    doi:10.1177/1077558715588437

Nielsen, K., Andersen, T., Jensen, R., Nielsen, J. H., & Chorkendorff, I. (2014). An open

    source data storage and visualization back end for experimental data. *Journal of*

    Laboratory Automation, *19*, 183-190. doi:10.1177/2211068213503824

Nisha, C., Manjaly, S., Kiran, P., Mathew, B., & Kasturi, A. (2015). Study on elder abuse

    and neglect among patients in a medical college hospital, Bangalore, India.

    Journal of Elder Abuse & Neglect, 28, 34-40.

    doi:10.1080/08946566.2015.1113599

Noureldin, M., Abrahamson, K., & Arling, G. W. (2018). Home and community based

    service organizations capacity for and experiences with quality improvement

    initiatives. *Home Health Care Management & Practice*, *31*, 23-29.

    doi:10.1177/1084822318796105

O'Donnell, D., Treacy, M. P., Fealy, G., Lyons, I., & Lafferty, A. (2014). The case

    management approach to protecting older people from abuse and mistreatment:

    Lessons from the Irishexperience. *British Journal of Social Work, 45,* 1451-1468.

    doi:10.1093/bjsw/bcu027

Older Adult Services Act, 320 I.L.C.S. § 42.

O'Reilly, M., & Parker, N. (2012). Unsatisfactory saturation: A critical exploration of the notion of saturated sample sizes in qualitative research. *Qualitative Research, 13,* 190-197. doi:10.1177/1468794112446106

Owen, G. T. (2014). Qualitative methods in higher education policy analysis: Using interviews and document analysis. *The Qualitative Report*, *19*(26), 1-19. Retrieved from http://nsuworks.nova.edu/tqr/vol19/iss26/2

Ozmete, E., & Megahead, H. A. (2016). Screening for elder abuse among Turkish older people: Validity of the hwalek sengstock elder abuse screening test. *Research on Social Work Practice, 27,* 387-398. doi:10.1177/1049731516654573

Palmer, G., D'Orazio, V., Kenwick, M., & Lane, M. (2015). The militarized interstate dispute dataset, 2002–2010: Procedures, coding rules and description. *Conflict Management and Peace Science*, *32*, 222-242. doi:10.1177/0738894214559680

Palmer, M., Brodell, R. T., & Mostow, E. N, (2013). Elder abuse: Dermatologic clues and critical solutions. *Journal of the American Academy of Dermatology*, *68*, 37-42. doi:10.1016/j.jaad.2011.03.016

Park, S., Lim, J., & Kim, J. N. (2015). A secure storage system for sensitive data protection based on mobile virtualization. *International Journal of Distributed Sensor Networks*, *11*, 1-8. doi:10.1155/2015/929380

Parker, M., & Bull, S. (2015). Sharing public health research data: Toward the development of ethical data sharing practice in low and middle income settings. *Journal of Empirical Research on Human Research Ethics, 10,* 217-224. doi:10.1177/1556264615593494

Payne, B. K. (2008). Elder physical abuse and failure to report cases: Similarities and differences in case type and the justice systems response. *Crime & Delinquency*, *59*, 697-717. doi:10.1177/0011128708317940

Peter, E., & Friedland, J. (2017). Recognizing risk and vulnerability in research ethics: Imagining the what ifs. *Journal of Empirical Research on Human Research Ethics, 12,* 107-116. doi:10.1177/1556264617696920

Petkov, M. P., & Kaoullas, L. G. (2016). Overcoming respondent resistance at elite interviews using an intermediary. *Qualitative Research, 16,* 411-429. doi:10.1177/1468794115589646

Pezalla, A. E., Pettigrew, J., & Miller-Day, M. (2012). Researching the researcher as instrument: An exercise in interviewer self reflexivity. *Qualitative Research*, *12*, 165-185. doi:10.1177/1468794111422107

Pezaro, S., Clyne, W., & Gerada, C. (2016). Confidentiality, anonymity and amnesty for midwives in distress seeking online support: Ethical. *Nursing Ethics*, *1*, 1-24. doi:10.1177/0969733016654315

Phelan, A. (2014). Elder abuse: A review of progress in Ireland. *Journal of Elder Abuse & Neglect, 26,* 172-188. doi:10.1080/08946566.2013.784088

Phillippi, J., & Lauderdale, J. (2017). A guide to field notes for qualitative research: Context and conversation. *Qualitative Health Research*, *1*, 1-8. doi:10.1177/1049732317697102

Pillemer, K., Burnes, D., Riffin, C., & Lachs, M. S. (2016). Elder abuse: Global situation risk factors and prevention strategies. *The Gerontologist, 56,* 194-205. doi:10.1093/geront/gnw004

Pillemer, K., Connolly, M. T., Breckman, R., Spreng, N., & Lachs, M. S, (2015). Elder mistreatment: Priorities for consideration by the white house conference on aging. *The Gerontologist*, *55*, 320-327. doi:10.1093/geront/gnu180

Pinsky, D. (2015). The sustained snapshot: Incidental ethnographic encounters in qualitative interview studies. *Qualitative Research*, *15*, 281-295. doi:10.1177/1468794112473493

Policastro, C., & Finn, M. A. (2017). Coercive control and physical violence in older adults: Analysis using data from the national elder mistreatment study. *Journal of Interpersonal Violence, 32,* 311-330. doi:10.1177/0886260515585545

Policastro, C., & Payne, B. K. (2013). Assessing the level of elder abuse knowledge preprofessionals possess: Implications for the further development of university curriculum. *Journal of Elder Abuse & Neglect, 26,* 12-30. doi:10.1080/08946566.2013.784070

Popping, R. (2015). Analyzing open ended questions by means of text analysis procedures. *Bulletin of Sociological Methodology*, *128*, 23-39. doi:10.1177/0759106315597389

Ravitch, S. M., & Carl, N. M. (2015). *Qualitative research: Bridging the conceptual, theoretical, and methodological*. Thousand Oaks, CA: Sage.

Reingle-Gonzalez, J. M., Cannell, M. B., Jetelina, K., & Radpour, S. (2016). Barriers in detecting elder abuse among emergency medical technicians. *Bio Med Central Emergency Medicine, 16,* 1-8. doi:10.1186/s12873-016-0100-7

Rennison, C. M., & Addington, L. A. (2014). Violence against college women: A review to identify limitations in defining the problem and inform future research. *Trauma, Violence, & Abuse*, *15*, 159-169. doi:10.1177/1524838014520724

Rich, G. J. (2016). The promise of qualitative inquiry for positive psychology: Diversifying methods. *The Journal of Positive Psychology*, *12*, 220-231. doi:10.1080/17439760.2016.1225119

Robbins, R. (2013). Stories of risk and protection: A turn to the narrative in social policy education. *Social Work Education*, *32*, 380-396. doi:10.1080/02615479.2012.665866

Robinson, O. C. (2013). Sampling in interview based qualitative research: A theoretical and practical guide. *Qualitative Research in Psychology, 11,* 25-41. doi:10.1080/14780887.2013.801543

Rosenthal, M. (2016). Qualitative research methods: Why when and how to conduct interviews and focus groups in pharmacy research. *Currents in Pharmacy Teaching and Learning, 8,* 509-516. doi:10.1016/j.cptl.2016.03.021

Rost, K., & Ehrmann, T. (2015). Reporting biases in empirical management research: The example of win win corporate social responsibility. *Business & Society*, *56*, 840-888. doi:10.1177/0007650315572858

Roulston, K. (2010). Considering quality in qualitative interviewing. *Qualitative Research*, *10*, 199-228. doi:10.1177/1468794109356739

Rowe, J. W., Fulmer, T., & Fried, L. (2016). Preparing for better health and health care for an aging population. *Journal of the American Medical Association, 316,* 1643-1644. doi:10.1001/jama.2016.12335

Rudestam, K. E., & Newton, R. R. (2014). *Surviving your dissertation: A comprehensive guide to content and process* (4th ed.). Thousand Oaks: CA: Sage.

Rudick, C. K. (2016). A critical organizational communication framework for communication and instruction scholarship: narrative explorations of resistance, racism, and pedagogy. *Communication Education*, *66*, 148-167. doi:10.1080/03634523.2016.1265137

Ruelas-Gonzalez, M. G., Duarte-Gomez, M. B., Flores-Hernandez, S., Ortega-Altamirano, D. V., Cortes-Gil, J. D., Taboada, A., & Ruano, A. L. (2016). Prevalence and factors associated with violence and abuse of older adults in Mexicos 2012 national health and nutrition survey. *International Journal for Equity in Health, 15.* 1-9. doi:10.1186/s12939-016-0315-y

Sabatier, P. A., & Weible, C. M. (2014). *Theories of the policy process* (3rd ed.). Boulder: CO: Westview Press.

Saldana, J. (2016). *The coding manual for qualitative researchers* (3rd ed.). Thousand Oaks: CA: Sage.

Samsi, K., Manthorpe, J., & Chandaria, K. (2014). Risks of financial abuse of older people with dementia: Findings from a survey of United Kingdom voluntary

sector dementia community services staff. *The Journal of Adult Protection, 16,* 180-192. doi:10.1108/jap-04-2013-0018

Santiago-Delefosse, M., Bruchez, C., Gavin, A., Stephen, S. L., & Roux, P. (2015). Complexity of the paradigms present in quality criteria of qualitative research grids. *SAGE Open, 5,* 1-13. doi:10.1177/2158244015621350

Saunders, M., & Sin, C. (2014). Middle managers experience of policy implementation and mediation in the context of the Scottish quality enhancement framework. *Assessment & Evaluation in Higher Education*, *40*, 135-150. doi:10.1080/02602938.2014.892056

Scheiderer, E. M. (2012). Elder abuse: Ethical and related considerations for professionals in psychology. *Ethics & Behavior, 22,* 75-87. doi:10.1080/10508422.2012.638828

Schlager, E., & Weible, C. M. (2013). New theories of the policy process. *Policy Studies Journal, 41,* 389-396. doi:10.1111/psj.12030

Schmucker, L., & Illar, F. (2001). Agency background and comments on the possible impact of the prospective payment system enacted in october 2000. *Home Health Care Management & Practice*, *13*, 270-272. doi:10.1177/108482230101300404

Seitz, S. (2016). Pixilated partnerships overcoming obstacles in qualitative interviews via skype: A research note. *Qualitative Research, 16,* 229-235. doi:10.1177/1468794115577011

Sengstock, M. C., & Marshall, B. I. (2013). Adult protective services workers assess the effectiveness of mandatory reporting of elder maltreatment in Michigan. *Journal of Applied Social Science, 7,* 220-232. doi:10.1177/1936724412462340

Shanahan, E. A., Jones, M. D., & McBeth, M. K. (2011). Policy narratives and policy processes. *Policy Studies Journal*, *39*, 535-561. doi:10.1111/j.1541-0072.2011.00420.x

Shanahan, E. A, McBeth, M. K., & Hathaway, P. L. (2011). Narrative policy framework: The influence of media policy narratives on public opinion. *Politics & Policy*, *39*, 373-400. doi:10.1111/j.1747-1346.2011.00295.x

Shelley, G. K., Castro, C., & Cron, S. G. (2015). Utilizing online tools to increase volunteer ombudsmen presence in long term care. *Geriatric Nursing, 36,* 52-56. doi:10.1016/j.gerinurse.2014.11.001

Sher, S. (2015). Confidential communication: A corporate social responsibility game. *Simulation & Gaming*, *46*, 591-630. doi:10.1177/1046878115600923

Shin, H., & Choi, B. D. (2014). Risk Perceptions in United Kingdom climate change and energy policy narratives. *Journal of Environmental Policy & Planning*, *17*, 84-107. doi:10.1080/1523908x.2014.906301

Sibbald, S. L., MacGregor, J. C. D., MacMillan, H. L., & Wathen, N. (2017). A qualitative study of challenges and opportunities in mobilizing research knowledge on violence against women. *Canadian Journal of Nursing Research*, *49*, 5-15. doi:10.1177/0844562116688840

Sirey, J., Berman, J., Salamone, A., DePasquale, A., Halkett, A., & Raeifar, E., … Raue, P. J. (2015). Feasibility of integrating mental health screening and services into routine elder abuse practice to improve client outcomes. *Journal of Elder Abuse & Neglect, 27,* 254-269. doi:10.1080/08946566.2015.1008086

Skilling, P. (2012). Immigration policy in New Zealand: Divergent narratives, shared assumptions and national identity. *Critical Policy Studies*, *6*, 363-378. doi:10.1080/19460171.2012.730765

Slominski, P. (2016). Energy and climate policy: Does the competitiveness narrative prevail in times of crisis. *Journal of European Integration*, *38*, 343-357. doi:10.1080/07036337.2016.1140759

Smith, D. (2013). The power of collective narratives to inform public policy: Reconceptualizing a principals qualification program. *International Journal of Leadership in Education*, *16*, 349-366. doi:10.1080/13603124.2012.745616.

Snilstveit, B., Oliver, S., & Vojtkova, M. (2012). Narrative approaches to systematic review and synthesis of evidence for international development policy and practice. *Journal of Development Effectiveness*, *4*, 409-429. doi:10.1080/19439342.2012.710641

Snow, K. C., Hays, D. G., Caliwagan, G., Ford, D. J., Mariotti, D., Mwendwa, J. M., & Scott, W. E. (2016). Guiding principles for indigenous research practices. *Action Research, 14,* 357-375. doi:10.1177/1476750315622542

Sooryanarayana, R., Choo, W. Y., & Hairi, N. N. (2013). A review on the prevalence and

    measurement of elder abuse in the community. *Trauma, Violence, & Abuse*, *14*,

    316–325. doi:10.1177/1524838013495963

State of Illinois. (2016). *Illinois state budget fiscal year 2016.* Retrieved from

    http://www.illinois.gov/gov/budget/Documents/Budget%20Book/Budget%20Boo

    k%20FY16/FY2016IllinoisOperatingBudgetBook.pdf#page=233

State of Illinois Department on Aging. (2004). *Elder abuse and neglect program annual*

    report fiscal year 2004. Retrieved from http://www.illinois.gov/aging/

    ProtectionAdvocacy/Documents/ea-an_report2004.pdf

State of Illinois Department on Aging. (2005). *Elder abuse and neglect program annual*

    report fiscal year 2005. Retrieved from http://www.illinois.gov/aging/

    ProtectionAdvocacy/Documents/ea-an_report2005.pdf

State of Illinois Department on Aging. (2006). *Elder abuse and neglect program annual*

    report fiscal year 2006. Retrieved from http://www.illinois.gov/aging/

    ProtectionAdvocacy/Documents/ea-an_report2006.pdf

State of Illinois Department on Aging. (2007). *Elder abuse and neglect program annual*

    report fiscal year 2007. Retrieved from http://www.illinois.gov/aging/Protection

    Advocacy/Documents/ea-an_report2007.pdf

State of Illinois Department on Aging. (2008). *Elder abuse and neglect program annual*

    report fiscal year 2008. Retrieved from http://www.illinois.gov/aging/

    ProtectionAdvocacy/Documents/ea-an_report2008.pdf

State of Illinois Department on Aging. (2009). *Elder abuse and neglect program annual report fiscal year 2009.* Retrieved from http://www.illinois.gov/aging/ ProtectionAdvocacy/Documents/ea-an_report2009.pdf

State of Illinois Department on Aging. (2010). *Elder abuse and neglect program annual report fiscal year 2010.* Retrieved from http://www.illinois.gov/aging/ ProtectionAdvocacy/Documents/ea-an_report2010.pdf

State of Illinois Department on Aging. (2011). *Elder abuse and neglect program annual report fiscal year 2011.* Retrieved from http://www.illinois.gov/ aging/ProtectionAdvocacy/Documents/ea-an_report2011.pdf

State of Illinois Department on Aging. (2012). *Elder abuse and neglect program annual report fiscal year 2012.* Retrieved from http://www.illinois.gov/ aging/ProtectionAdvocacy/Documents/ea-an_report2012.pdf

State of Illinois Department on Aging. (2013). *Elder abuse and neglect program annual report fiscal year 2013.* Retrieved from http://www.illinois.gov/aging/Protection Advocacy/Documents/ElderAbuseRpt2013_web_document%20only.pdf

State of Illinois Department on Aging. (2014). *Adult protective services annual report fiscal year 2014.* Retrieved from http://www.illinois.gov/aging/ ProtectionAdvocacy/Documents/DoA2014_Adult%20Protective%20Services%20 An%20Rpt_web%20document.pdf

State of Illinois Department on Aging. (2015). *Adult protective services annual report fiscal year 2015.* Retrieved from http://www.illinois.gov/aging/ ProtectionAdvocacy/Documents/FY15%20APS-narrative.pdf

State of Illinois Department on Aging. (2016). *Adult protective services annual report fiscal year 2016.* Retrieved from http://www.illinois.gov/aging/ ProtectionAdvocacy/Documents/FY16_APS%20Annual%20Rpt.pdf

State of Illinois Department on Aging. (2017). *Adult protective services annual report fiscal year 2017.* Retrieved from http://www.illinois.gov/aging/Resources /NewsAndPublications/Publications/Documents/FY17_APS_AnnualReport.pdf

Strasser, S. M., & Fulmer, T. (2007). The clinical presentation of elder neglect: What we know and what we can do. *Journal of the American Psychiatric Nurses Association, 12,* 340-349. doi:10.1177/1078390306298879

Sun, Y., Zhang, J., Xiong, Y., & Zhu, G. (2014). Data security and privacy in cloud computing. *International Journal of Distributed Sensor Networks*, *10*, 1-9. doi:10.1155/2014/190903

Suter, W. N., & Suter, P. M. (2017). Institutional review boards evaluate good science: Template for success. *Home Health Care Management & Practice*, *29*, 121-125. doi:10.1177/1084822316674454

Sykes, B. L., Verma, A., & Hancock, B. H. (2017). Aligning sampling and case selection in quantitative-qualitative research designs: Establishing generalizability limits in mixed method studies. *Ethnography*, *1*, 1-27. doi:10.1177/1466138117725341

Tareque, M. I., Ahmed, M. M., Tiedt, A. D., & Hoque, N. (2014). Can an active aging index provide insight into reducing elder abuse: A case study in Rajshahi district, Bangladesh. *Archives of Gerontology & Geriatrics, 58,* 399-407. doi:10.1016/j.archger.2013.11.003

Tareque, M. I., Islam, T. M., Koshio, A., & Kawahara, K. (2015). Economic well being and elder abuse in Rajshahi district of Bangladesh. *Research on Aging, 37,* 200-224. doi:10.1177/0164027514527833

Taylor, B. J., Killick, C., O'Brien, M., Begley, E., & Carter-Anand, J. (2014). Older peoples conceptualization of elder abuse and neglect. *Journal of Elder Abuse & Neglect, 26,* 223-243. doi:10.1080/08946566.2013.795881

Teresi, J. A., Burnes, D., Skowron, E. A., Dutton, M. A., Mosqueda, L., Lachs, M. S., & Pillemer, K. (2016). State of the science on prevention of elder abuse and lessons learned from child abuse and domestic violence prevention: Toward a conceptual framework for research. *Journal of Elder Abuse & Neglect, 28,* 263-300. doi:10.1080/08946566.2016.1240053

Terry, R. L., Schwede, L., King, R., Martinez, M., & Childs, J. H. (2017). Exploring inconsistent counts of racial ethnic minorities in a 2010 census ethnographic evaluation. *Bulletin De Methodologie Sociologique*, *132*, 32-49. doi10.1177/0759106317710849

Thobaben, M. (2012). Elder abuse is a crime that home health nurses can help prevent from occurring. *Home Health Care Management & Practice, 24,* 107-109. doi:10.1177/1084822311429823

Tilse, C., & Wilson, J. (2013). Recognising and responding to financial abuse in residential aged care. *The Journal of Adult Protection, 15,* 141-152. doi:10.1108/jap-11-2012-0025

Torrance, H. (2017). Experimenting with qualitative inquiry. *Qualitative Inquiry, 23,*

69-76. doi:10.1177/1077800416649201

Tracy, S. J. (2010). Qualitative quality: Eight big tent criteria for excellent qualitative

research. *Qualitative Inquiry*, *16*, 837-851. doi:10.1177/1077800410383121

Trotter, R. T. (2012). Qualitative research sample design and sample size: Resolving and

unresolved issues and inferential imperatives. *Preventive Medicine*, *55*, 398-400.

doi:10.1016/j.ypmed.2012.07.003

Tsan, M., & Nguyen, Y. (2017). Effectiveness of human research protection program

performance measurements. *Journal of Empirical Research on Human Research

Ethics*, *12*, 217-228. doi:10.1177/1556264617720387

Tsan, M., & Tsan, L. W. (2015). Assessing the quality of human research protection

programs to improve protection of human subjects participating in clinical trials.

Clinical Trials, *12*, 224-231. doi:10.1177/1740774514568688

Tuohy, R., Stephens, C., & Johnston, D. (2014). Qualitative research can improve

understandings about disaster preparedness for independent older adults in the

community. *Disaster Prevention and Management*, *23*, 296-308.

doi:10.1108/dpm-01-2013-0006

Turner, B. S. (2016). We are all denizens now: On the erosion of citizenship. *Citizenship

Studies, 20,* 679-692. doi:10.1080/13621025.2016.1191432

United States Department of Health and Human Services, Administration for Community

Living. (2004a). *Title III: Grants for state and community programs on aging

fiscal year 2004 final allocation.* Retrieved from

http://www.acl.gov/sites/default/files/about-acl/2016-10/T3_2004.pdf

United States Department of Health and Human Services, Administration for Community

Living. (2004b). *Title VII: Allotments for vulnerable elder rights protection*

activities fiscal year 2004 final allocation. Retrieved From

http://www.acl.gov/sites/default/files/about-acl/2016-10/T7_2004.pdf

United States Department of Health and Human Services, Administration for Community

Living. (2005a). *Title III: Grants for state and community programs on aging*

fiscal year 2005 final allocation. Retrieved from

http://www.acl.gov/sites/default/files/about-acl/2016-10/T3_2005.pdf

United States Department of Health and Human Services, Administration for Community

Living. (2005b). *Title VII: Allotments for vulnerable elder rights protection*

activities fiscal year 2005 final allocation. Retrieved From

http://www.acl.gov/sites/default/files/about-acl/2016-10/T7_2005.pdf

United States Department of Health and Human Services, Administration for Community

Living. (2006a). *Title III: Grants for state and community programs on aging*

fiscal year 2006 final allocation. Retrieved from

http://www.acl.gov/sites/default/files/about-acl/2016-10/T3_2006.pdf

United States Department of Health and Human Services, Administration for Community

Living. (2006b). *Title VII: Allotments for vulnerable elder rights protection*

activities fiscal year 2006 final allocation. Retrieved From

http://www.acl.gov/sites/default/files/about-acl/2016-10/T7_2006.pdf

United States Department of Health and Human Services, Administration for Community

Living. (2007a). *Title III: Grants for state and community programs on aging*

fiscal year 2007 final allocation. Retrieved from

http://www.acl.gov/sites/default/files/about-acl/2016-10/T3_2007.pdf

United States Department of Health and Human Services, Administration for Community

Living. (2007b). *Title VII: Allotments for vulnerable elder rights protection*

activities fiscal year 2007 final allocation. Retrieved From

http://www.acl.gov/sites/default/files/about-acl/2016-10/T7_2007.pdf

United States Department of Health and Human Services, Administration for Community

Living. (2008a). *Title III: Grants for state and community programs on aging*

fiscal year 2008 final allocation. Retrieved from

http://www.acl.gov/sites/default/files/about-acl/2016-10/T3_2008.pdf

United States Department of Health and Human Services, Administration for Community

Living. (2008b). *Title VII: Allotments for vulnerable elder rights protection*

activities fiscal year 2008 final allocation. Retrieved From

http://www.acl.gov/sites/default/files/about-acl/2016-10/T7_2008.pdf

United States Department of Health and Human Services, Administration for Community

Living. (2009a). *Title III: Grants for state and community programs on aging*

fiscal year 2009 final allocation. Retrieved from

http://www.acl.gov/sites/default/files/about-acl/2016-10/T3_2009.pdf

United States Department of Health and Human Services, Administration for Community

Living. (2009b). *Title VII: Allotments for vulnerable elder rights protection*

activities fiscal year 2009 final allocation. Retrieved From http://www.acl.

gov/sites/default/files/about-acl/2016-10/T7_2009.pdf

United States Department of Health and Human Services, Administration for Community Living. (2010a). *Title III: Grants for state and community programs on aging fiscal year 2010 final allocation.* Retrieved from http://www.acl.gov/sites/default/files/about-acl/2016-10/T3_2010Final.pdf

United States Department of Health and Human Services, Administration for Community Living. (2010b). *Title VII: Allotments for vulnerable elder rights protection activities fiscal year 2010 final allocation.* Retrieved From http://www.acl.gov/sites/default/files/about-acl/2016-10/T7_2010Final.pdf

United States Department of Health and Human Services, Administration for Community Living. (2011a). *Title III: Grants for state and community programs on aging fiscal year 2011 final allocation.* Retrieved from http://www.acl.gov/sites/default/ files/about-acl/2016-10/T3_2011.pdf

United States Department of Health and Human Services, Administration for Community Living. (2011b). *Title VII: Allotments for vulnerable elder rights protection activities fiscal year 2011 final allocation.* Retrieved From http://www.acl.gov/sites/default/files/about-acl/2016-10/T7_2011.pdf

United States Department of Health and Human Services, Administration for Community Living. (2012a). *Title III: Grants for state and community programs on aging fiscal year 2012 final allocation.* Retrieved from http://www.acl.gov/sites/default/files/about-acl/2016-10/T3_2012.pdf

United States Department of Health and Human Services, Administration for Community

    Living. (2012b). *Title VII: Allotments for vulnerable elder rights protection*

    activities fiscal year 2012 final allocation. Retrieved From

    http://www.acl.gov/sites/default/files/about-acl/2016-10/T7_2012.pdf

United States Department of Health and Human Services, Administration for Community

    Living. (2013a). *Estimates of sequester impact for state formula grant programs*

    under the Older Americans Act. Retrieved from http://www.acl.gov/sites/default/

    files/about-acl/2016-10/OAA_Formula_Grant_Estimates.pdf

United States Department of Health and Human Services, Administration for Community

    Living. (2013b). *Title III: Grants for state and community programs on aging*

    fiscal year 2013 final allocation. Retrieved from

    http://www.acl.gov/sites/default/files/about-acl/2016-10/T3_2013.pdf

United States Department of Health and Human Services, Administration for Community

    Living. (2013c). *Title VII: Allotments for vulnerable elder rights protection*

    activities fiscal year 2013 final allocation. Retrieved From

    http://www.acl.gov/sites/default/files/about-acl/2016-10/T7_2013.pdf

United States Department of Health and Human Services, Administration for Community

    Living. (2014a). *Title III: Grants for state and community programs on aging*

    fiscal year 2014 final allocation. Retrieved from

    http://www.acl.gov/sites/default/files/about-acl/2016-10/T3_2014.pdf

United States Department of Health and Human Services, Administration for Community Living. (2014b). *Title VII: Allotments for vulnerable elder rights protection activities fiscal year 2014 final allocation.* Retrieved From http://www.acl.gov/sites/default/files/about-acl/2016-10/T7_2014_0.pdf

United States Department of Health and Human Services, Administration for Community Living. (2015a). *Title III: Grants for state and community programs on aging fiscal year 2015 final allocation.* Retrieved from http://www.acl.gov/sites/default/files/about-acl/2016-10/T3-2015.pdf

United States Department of Health and Human Services, Administration for Community Living. (2015b). *Title VII: Allotments for vulnerable elder rights protection activities fiscal year 2015 final allocation.* Retrieved From http://www.acl.gov/sites/default/files/about-acl/2016-10/T7-2015.pdf

United States Department of Health and Human Services, Administration for Community Living. (2016a). *Title III: Grants for state and community programs on aging fiscal year 2016 final allocation.* Retrieved from http://www.acl.gov/sites/default/files/about-acl/2016-10/T3-2016.pdf

United States Department of Health and Human Services, Administration for Community Living. (2016b). *Title VII: Allotments for vulnerable elder rights protection activities fiscal year 2016 final allocation.* Retrieved From http://www.acl.gov/ sites/default/files/about-acl/2018-01/TitleVIIFY16AllocationElderRights.pdf

United States Department of Health and Human Services, Administration for Community Living. (2017a). *Title III: Grants for state and community programs on aging*

fiscal year 2017 final allocation. Retrieved from

http://www.acl.gov/sites/default/files/about-acl/2017-10/TitleIII-2017.pdf

United States Department of Health and Human Services, Administration for Community

Living. (2017b). *Title VII: Allotments for vulnerable elder rights protection*

activities fiscal year 2017 final allocation. Retrieved From

http://www.acl.gov/sites/default/files/about-acl/2017-10/TitleVII-2017.pdf

United Way of Illinois. (2013). *2013 Annual report.* Retrieved from

http://www.unitedwayillinois.org/documents/uwil2013_annual_report.pdf.

United Way of Illinois. (2014a). *2014 Annual report.* Retrieved from

http://www.unitedwayillinois.org/documents/uwil2014_annual_report.pdf

United Way of Illinois. (2014b). *New administration requires renewed engagement.*

Retrieved from http://www.unitedwayillinois.org/public/advocacynews-

dec2014.php

United Way of Illinois. (2015a). *2015 Annual report.* Retrieved from

http://www.unitedwayillinois.org/documents/uwil2015_annual_report.pdf

United Way of Illinois. (2015b). *Governor Rauner outlines budget with deep cuts to key*

programs. Retrieved from http://www.unitedwayillinois.org/

public/advocacynews_march2015.php

United Way of Illinois. (2015c). *Human service agencies already cutting services amidst*

state budget stalemate. Retrieved from http://www.unitedwayillinois.

org/documents/United_Way_of_Illinois_Agency_Survey.pdf

United Way of Illinois. (2015d). *United Way of Illinois agency survey on state budget: High level findings.* Retrieved from http://www.unitedwayillinois.org/ documents/UWI_Survey_Results_Overview.pdf

United Way of Illinois. (2016a). *2016 Annual report.* Retrieved from http://www.unitedwayillinois.org/documents/uwil2016_annual_report.pdf

United Way of Illinois. (2016b). *After a year with no state budget, fourth United Way of Illinois survey shows accelerating damage to those in in need of service, sector viability.* Retrieved from http://www.unitedwayillinois.org/documents/ 4thSurveyPressRelease2016.pdf

United Way of Illinois. (2016c). *Seven months into state budget impasses: United Way if Illinois survey shows extensive cuts to human service program and harm to sector.* Retrieved from http://www.unitedwayillinois.org/public/seven-months-into-state-budget-impasse-united-way-of-illinois-survey.php

United Way of Illinois. (2016d). *United Way of Illinois fourth agency state budget survey: High level findings.* Retrieved from http://www.unitedwayillinois. org/documents/UWIStateBudgetSurvey2016.pdf

United Way of Illinois. (2017a). *2017 Annual report.* Retrieved from http://www.unitedwayillinois.org/documents/uwil2017_annual_report.pdf

United Way of Illinois. (2017b). *Advocate.* Retrieved from http://www.unitedwayillinois.org/

United Way of Illinois. (2017c). *United Way of Illinois post stop gap funding survey: High level findings.* Retrieved from http://www.unitedwayillinois.org/ documents/UWI-AprilSBS_F.pdf

United Way of Illinois. (2018). *2018 Annual report.* Retrieved from http://www.unitedwayillinois.org/documents/uwil2018_annual_report.pdf

Veselkova, M. (2014). Science, stories and the anti vaccination movement. *Human Affairs*, *24*. doi:10.2478/s13374-014-0227-8

Waite, D. (2014). Teaching the unteachable: Some issues of qualitative research pedagogy. *Qualitative Inquiry, 20,* 267-281. doi:10.1177/1077800413489532

Wei, J., Liu, J., Zhang, R., & Niu, X. (2016). Efficient dynamic replicated data possession checking in distributed cloud storage systems. *International Journal of Distributed Sensor Networks*, *12*, 1-11. doi:10.1155/2016/1894713

Weible, C. M., Sabatier, P. A., Jenkins-Smith, H. C., Nohrstedt, D., Henry, A. D., & DeLeon, P. (2011). A quarter century of the advocacy coalition framework: An introduction to the special issue. *Policy Studies Journal*, *39*, 349-360. doi:10.1111/j.1541-0072.2011.00412.x

Weisser, F. B., Bristowe, K., & Jackson, D. (2015). Experiences of burden, needs, rewards and resilience in family caregivers of people living with motor neurone disease amyotrophic lateral sclerosis: A secondary thematic analysis of qualitative interviews. *Palliative Medicine*, *29*, 737-745. doi:10.1177/0269216315575851

Wendt, S., Bagshaw, D., Zannettino, L., & Adams, V. (2015). Financial abuse of older

    people: A case study. *International Social Work, 58,* 287-296.

    doi:10.1177/0020872813477882

White, J. W., Sienkiewicz, H. C., & Smith, P. H. (2018). Envisioning future directions:

    Conversations with leaders in domestic and sexual assault advocacy, policy,

    service, and research. *Violence Against Women*, *25*, 105-127.

    doi:10.1177/1077801218815771

Williams, E. N., & Morrow, S. L. (2009). Achieving trustworthiness in qualitative

    research: A pan paradigmatic perspective. *Psychotherapy Research*, *19*, 576-582.

    doi:10.1080/10503300802702113

Wong, J. S., & Waite, L. J. (2016). Elder mistreatment predicts later physical and

    psychological health: Results from a national longitudinal study. *Journal of Elder*

    Abuse & Neglect, 29, 15-42. doi:10.1080/08946566.2016.1235521

Wynd, C. A., Schmidt, B., & Schaefer, M. A. (2003). Two quantitative approaches for

    estimating content validity. *Western Journal of Nursing Research*, *25*, 508-518.

    doi:10.1177/0193945903252998

Yan, E. (2015). Elder abuse and help seeking behavior in elderly Chinese. *Journal of*

    Interpersonal Violence, 30, 2683-2708. doi:10.1177/0886260514553628

Yan, E., Chan, K., & Tiwari, A. (2015). A systematic review of prevalence and risk

    factors for elder abuse in Asia. *Trauma, Violence, & Abuse, 16,* 199-219.

    doi:10.1177/1524838014555033

Yardley, S. J., Watts, K M.., Pearson, J., & Richardson, J. C. (2014). Ethical Issues in the

    reuse of qualitative data: Perspectives from literature, practice, and

    participants. *Qualitative Health Research*, *24*, 102-113.

    doi:10.1177/1049732313518373

Ylli, A. (2010). Health and social conditions of older people in Albania: Baseline data

    from a National Survey. *Public Health Reviews, 32,* 549-560.

    doi:10.1007/bf03391616

Yu, H., Abdullah, A., & Saat, R. M. (2014). Overcoming time and ethical constraints in

    the qualitative data collection process: A case of information literacy

    research. *Journal of Librarianship and Information Science*, *46*, 243-257.

    doi:10.1177/0961000614526610

Ziminski-Pickering, C. E., & Rempusheski, V. F. (2014). Examining barriers to self

    reporting of elder physical abuse in community dwelling older adults. *Geriatric*

    Nursing, 35, 120-125. doi:10.1016/j.gerinurse.2013.11.002

Appendix A: Letter to the Adult Protective Service Director

Date:
Name of Director:
Address:

Dear, Director's last name,

My name is Angelique Marie Pass, a doctoral candidate, at Walden University. I am conducting a study regarding the issue of elderly abuse. The purpose of this letter is that I am conducting interviews with the directors of the 13 planning and service areas and would like to interview you as part of my study. The results of this study will be utilized to create more awareness concerning the issue of elderly abuse as well as increase the knowledgebase. I know you are busy and your time is valuable; however, I feel the information you have to offer is critical to this study. The data collected from this interview will be kept confidential. If you do not wish to meet in person I am willing to perform this interview through telephone or email.

I will be in contact to schedule the interview. My contact information is xxx-xxx-xxxx or you may email me at xxx@waldenu.edu. I thank you in advance and look forward to our interview.

Regards,

Angelique Marie Pass

Angelique Marie Pass

Doctoral Candidate

Walden University

Appendix B: Interview Questions

A Directors Perspective

1. What specific types of services are offered at the agency in which you are employed?

2. What duties do you perform within your agency?

3. Do you have a current waitlist at any of the providers you contract?

4. Is your agency currently short staffed, specifically in terms of caseworkers?

5. How long have you been a director?

6. What are some perceived shortcomings concerning case investigations related to elderly abuse?

7. Has there been times when a case may not be able to be investigated if yes why?

8. Are there any resources you wish you had that would make the job easier to perform?

9. What are some negative issues that impact your ability to investigate elderly abuse?

10. Do you believe the current policies go far enough in addressing elderly abuse?

11. How would you amend current policies?

12. Are there any barriers you believe that effect reporting of elderly abuse?

13. How much funding is given to service providers?

14. How much funding do you receive from the state of Illinois?

15. How much funding do you receive from the federal government?

16. How much funding do you receive from donors as well as grants?

17. How much money is spent on male victims?

18. How much money is spent on female victims?

19. What are the percentage of male victims?

20. What are the percentage of female victims?