

Thirteen scenarios were used to measure and compare the perceptions of elder abuse and help-seeking behaviors of African-American, Caucasian American, and Korean-American elderly women. Significant group differences existed in their perceptions of elder abuse with regard to six scenarios, and the Korean-American women were substantially less likely to perceive a given situation as abusive than the other groups. The three groups also showed significant differences in their intended use of formal and informal sources of help in the case of elder abuse.

Key Words: Ethnic differences, Severity of elder abuse, Formal and informal help

Perceptions of Elder Abuse and Help-seeking Patterns Among African-American, Caucasian American, and Korean-American Elderly Women¹

Ailee Moon, PhD,² and Oliver Williams, PhD³

Researchers and practitioners have pointed to the lack of uniformity in the conceptualization and classification systems used to identify the behavior manifestations of elder maltreatment, whether it is elder abuse (physical, emotional, verbal, and sexual, or financial exploitation) or neglect (caregiver or self-neglect) (Hudson, 1989; Johnson, 1986, 1989; Pillemer & Finkelhor, 1988; Salend et al., 1984; Steinmetz, 1988, 1990). Consequently, they also question the applicability of instruments used to capture and measure the same construct of abuse and neglect from one region of the United States to another (Hall, 1986; Johnson, 1989; Brown, 1989; Blanton, 1989; Williams & Griffin, 1991).

The lack of uniformity in how to define and identify elder abuse or maltreatment may result in adult protection service cases that are mislabeled, interventions that are inappropriate, and outcomes that are unresponsive to aged clients. For example, Fredriksen (1989) noted that in Washington state this lack of clarity about what is or is not maltreatment resulted in arbitrary classification of moderate/mild elder maltreatment cases and, as a consequence, some cases that might have been abuse cases were denied services. Although mislabeling may be less frequent for extreme cases of elder maltreatment, it is clearly more frequent for borderline cases, where case workers are not able to assess the extent of a problem as easily (Hudson, 1989).

Even though researchers and practitioners have sought to develop a standard, comprehensive operational definition of elder abuse or maltreatment, one significant group has almost always been omitted from the process — the elderly themselves. Typically, the research has been more scholarly and practitioner-centered and less elderly-centered. Consequently, research concerning how the elderly perceive and identify an act as abusive and the extent to which their perceptions of abuse are consistent with professionals' classifications of abusive behaviors is unavailable. However, aged persons' insights, perceptions, and experiences as to what constitutes abuse must be regarded as important elements in developing improved information and classification systems, as well as intervention and training against elder abuse.

The elderly's perception of a situation as abusive or nonabusive may further influence their perception of whether and from where they would seek help in that situation. Practitioners and researchers need to understand the relationship between the perception of abuse and help-seeking patterns of elderly clients. It is possible, for example, that the elderly may identify sources other than social service agencies as places they would seek help from in an abusive situation. Therefore, the examination of help-seeking patterns will provide practitioners and researchers useful information for developing more responsive and effective strategies for helping the potential victims of elder abuse.

The purpose of this study was to examine: 1) how various potentially abusive situations are perceived by three groups of the elderly (African-Americans, Caucasian Americans, and Korean-Americans); 2) whether and to what extent the elders' perceptions of situations are correlated with their decision to

¹This research is supported by the College of Human Ecology Innovative Research Grant and the Graduate School Grants-in-Aid of the University of Minnesota. We thank Hae Kyung Choi, PhD, Mary Wappes, MSW, and Stephaney Johnson, MSW, for their assistance in data collection.

²Assistant professor, School of Social Welfare, University of California at Los Angeles, 247 Dodd Hall, 405 Hilgard Ave., Los Angeles, CA 90024.

³Assistant professor, School of Social Work, University of Minnesota at Minneapolis.

seek help; and 3) group similarities and differences in where or to whom they would turn for help in given situations.

Ethnicity, Elder Abuse, and Help-seeking Behavior

Although in the last two decades elder abuse has received increased attention, research that involves elder abuse and cultural diversity has been sparse. The traditional literature on elder abuse centers on the majority society's definition and experiences and surmises that the same conditions exist among minority populations or that elder abuse is not an issue with these groups (Cazenave, 1979, 1981; Hall, 1986; Brown, 1989; Williams & Griffin, 1991). Although there is little direct evidence that the majority's definition of elder abuse can be universally applicable to such groups as African-American, Asian-American, Native American, and Hispanic American elderly, information that does exist is even less generalizable. Indeed, studies in some other areas, such as mental health (Chau, 1989; Leigh, 1989; Sue & Zane, 1987) and child and spouse abuse (Asbury, 1987; Hampton, Gelles, & Harrop, 1989; Long, 1986; Straus & Giller, 1986) showed that such generalizations mask important group differences.

Of the few studies that focus on elder abuse among minorities or include them as part of the sample, the results are inconclusive. Cazenave and Straus (1979) found that black elderly were much less likely to be abused by a relative than were white elderly. In contrast, Hwalek and Sengstock (1987) found no statistical difference in the elder abuse pattern of whites and blacks in their study. Hall (1986) also noted little statistical difference among whites, blacks, and Hispanics, but differences among the groups did emerge in understanding the context of the problem for low-income and Hispanic clients. Moreover, in a poll conducted by Louis Harris and Associates (*Source book of Criminal Justice Statistics*, 1982), 58% of blacks, but only 36% of whites, interviewed considered elder abuse to be a very serious problem. Steinmetz (1990) argued that the findings from several studies seemed to predict higher elder abuse rates among blacks compared with whites. No previous research exists with regard to elder abuse among Korean-Americans.

Many studies indicated that minorities utilize informal supports more than whites (Liu & Yu, 1985; Gibson, 1989; Mitchell & Register, 1984; Sokolovsky, 1985; Taylor & Chatters, 1986). Older blacks tend to draw from a more varied pool of informal helpers and are more likely to use them interchangeably than are their white counterparts (Gibson, 1989). They are also viewed as having more support from friends, neighbors, and other associational contacts (George, 1988; Johnson & Barer, 1990; Ortega, Crutchfield, & Rushing, 1983; Ralston, 1984). A few studies, in contrast, found no greater support of black kin networks, refuting the generalization of blacks as having greater and more extensive informal support networks (Mindel, Wright, & Starrett, 1986; Smerglia, Deimling, & Barresi, 1988). According to Koh and Bell

(1987), Korean-American elders' most preferred sources of help were spouses and children, but a substantial proportion (one-third) of the respondents on the average indicated they looked to formal social services.

Method

Sample

The sample consisted of 30 African-American, 30 Korean-American, and 30 Caucasian American elderly women who resided in Minneapolis, Minnesota, in 1991. To reduce selection biases, two types of sampling sites — churches and social service agencies — were consistently used for selection of the study participants. In addition, given the small size of the sample, a nonprobability purposive sampling method was used to control for age and gender.

All respondents were female elders whose ages ranged from 60 to 75. Using a structured questionnaire, face-to-face interviews were conducted by three trained graduate students of the same ethnic backgrounds as the respondents. The questionnaire was also translated into Korean, after a back-translation test, and all of the Korean-American respondents were interviewed in Korean.

The demographic and socioeconomic characteristics of the sample are presented in Table 1. No significant group differences existed with regard to age, number of living children, and number of children in Minnesota. The average age was 69.5 and the number of children and those living in Minnesota were 3.6 and 2.3, respectively. Although the Korean-American elderly women, on the average, had more children (4.1) than African-American and Caucasian American elders (3.1 and 3.7, respectively), the majority of the Korean-American respondents' children lived elsewhere, whereas the majority of the children of the other two groups lived in Minnesota.

There were significant group differences in marital status, living arrangement, income, and educational level. While nearly two-thirds of the Caucasian American respondents were currently married, only 20.7% and 26.7% of African-American and Korean-American respondents, respectively, were married. Consequently, the majority of the Caucasian American respondents were living with spouses, whereas the majority of the other two groups were living alone. Among the three elderly groups, Korean-American respondents on the average had the lowest income and were the least educated, whereas Caucasian American respondents had the highest income and were the most educated.

Measures

Thirteen scenarios (see Appendix) were used to measure the perceptions of elder abuse and help-seeking behaviors of the elderly respondents. They were developed by the authors after a review of the literature on elder abuse and consultation with four caseworkers at the Adult Protective Service Department of Los Angeles County. All of the 13 scenarios

Table 1. Characteristics of the Sample of Elderly Women

Variable	Total	Racial groups			F ratio or Chi square
		African-American	Korean-American	Caucasian	
Age (mean)	69.5	68.9	70.6	68.6	1.18 ^b
Marital status (%)					
Currently married	37.1	20.7	26.7	63.3	36.02*** ^a
Widowed	50.6	41.4	73.3	36.7	
Divorced, separated, & never married	12.3	37.8	0.0	0.0	
Living arrangement (%)					
Alone	46.7	50.0	66.7	23.3	14.29* ^a
With spouse	35.6	26.7	20.0	60.0	
With relatives	14.4	20.0	10.0	13.3	
With friends or renters	3.3	3.3	3.3	3.3	
Monthly income (%) (N = 72)					
Less than \$1,000	65.3	70.0	89.7	30.4	23.13*** ^a
Between \$1,000 & \$2,000	23.6	25.0	10.3	39.1	
\$2,000 & over	11.1	5.0	0.0	30.4	
Educational level (%) (N = 89)					
Less than high school	25.8	6.7	66.7	3.4	39.58*** ^a
High school	40.4	53.3	16.7	51.7	
Some college or more	33.7	40.0	16.7	44.8	
Number of living children (mean)	3.6	3.1	4.1	3.7	1.30 ^b
Number of children in Minnesota (mean)	2.3	2.2	1.8	2.8	2.00 ^b

^aChi square.^bF ratio.* $p \leq .05$; ** $p \leq .01$; *** $p \leq .001$.

involve a female elder as a possible victim and a family member as a possible perpetrator. The scenarios aimed to cover various dimensions of elder abuse or mistreatment, including physical, psychological, verbal, sexual, medical mistreatment, neglect, and financial exploitation. For the Korean-American respondents, the living arrangements of the elders and the relationship to their primary family caregivers in four scenarios (Scenarios 2, 3, 4, and 6) were modified to reflect the culturally appropriate living arrangement and family caregiver selection, which dictates that they live with a married son's family, not a married daughter's, and be cared for by a daughter-in-law, not by a married daughter (Choi, 1985; Sorensen, 1986). Although statistics on the living arrangements of Korean immigrant elderly in the United States are not available, findings of a national survey conducted on 1,856 elderly persons in Korea in 1984 illuminate the rationale for modifying the four scenarios for Korean-American respondents: of the 79% of the total respondents living with their children, 54% were living with a married son's family, only 3% with a married daughter's, and the remaining 22% were living with unmarried children or other relatives (Choi, 1985).

The interviewers read each scenario to the respondents slowly and repeatedly, if necessary, until the respondents indicated a clear understanding of the situation. The respondents were then asked to determine whether the situation involved abuse by replying yes or no. If the respondents replied yes, they were also asked to identify what aspect of the situation was abusive (an open-ended question) and to rate the severity of abuse (mild, moderate, or severe). All of the respondents, regardless of whether they viewed the situation as abusive or not, were asked to indicate whether they would have asked or called someone for help if they had been the elderly person in the sce-

nario. Those who replied yes were further asked to identify who they would have most likely asked or called for help (an open-ended question).

Results

To determine whether there were significant differences among the three elderly groups in their perceptions of elder abuse, a test of significance using chi-square statistics was conducted for each of the 13 scenarios. In addition, Cramer's *V* was computed to provide supplementary information on the strength of the association between the ethnicity, the predictor variable, and perception of elder abuse, the dependent variable. The Cramer's *V* measure of association was especially useful for 6 of the 13 scenarios (Scenarios 1, 2, 5, 8, 9, and 10), for which the chi-square statistics were less useful because the resultant 3×2 crosstables contained 50% of the cells with expected frequencies of less than 5 cases. Cramer's *V* varies from 0 (no association) to 1 (perfect association).

As shown in Table 2, the respondents' perceptions of elder abuse varied substantially from scenario to scenario. For example, 83 of the total 90 respondents (92%) judged as abusive Scenario 5, which involved a photographer taking nude pictures of his senile mother-in-law and sharing the pictures with his friends, whereas only 9 respondents (10%) judged as abusive Scenario 2, which involved a daughter (daughter-in-law, for Korean-Americans) forcing her paralyzed mother (mother-in-law, for Korean-Americans), to eat and take the medication. With regard to 6 of the 13 scenarios (Scenarios 1, 3, 6, 8, 11, and 13), significant group differences existed in their judgment of elder abuse. Cramer's *V* also revealed that ethnicity was a more powerful predictor variable for the first three scenarios ($V = .515, .475, \text{ and } .649$,

Table 2. Distribution of Affirmative Responses by Groups of African-American, Korean-American, and Caucasian Elderly Women to 13 Scenarios of Possible Elder Abuse

Scenario	Total (N = 90)	African-American (N = 30)	Korean-American (N = 30)	Caucasian (N = 30)	Chi square (N) (DF = 2)	Cramer's V ^a
1	77 (85.6%)	30 (100.0%)	18 (60.0%)	29 (96.7%)	23.916*** (N = 90)	.515
2	9 (10.0%)	4 (13.3%)	1 (3.3%)	4 (13.3%)	2.516 (N = 86)	.171
3	33 (36.7%)	19 (63.3%)	3 (10.0%)	11 (36.7%)	19.388*** (N = 86)	.475
4	24 (26.7%)	13 (43.3%)	5 (16.7%)	6 (20.0%)	5.810 (N = 87)	.258
5	83 (92.2%)	30 (100.0%)	23 (76.7%)	30 (100.0%)	4.916 (N = 85)	.240
6	59 (65.6%)	27 (90.0%)	7 (23.3%)	25 (83.3%)	37.469*** (N = 89)	.649
7	21 (23.3%)	5 (16.7%)	7 (23.3%)	9 (30.0%)	1.333 (N = 89)	.122
8	81 (90.0%)	28 (93.3%)	25 (83.3%)	28 (93.3%)	7.071* ^b (N = 87)	.285
9	75 (83.3%)	25 (83.3%)	26 (86.7%)	24 (80.0%)	4.633 (N = 84)	.074
10	75 (83.3%)	25 (83.3%)	26 (86.7%)	24 (80.0%)	2.031 (N = 88)	.152
11	73 (81.1%)	26 (86.7%)	20 (66.7%)	27 (90.0%)	6.237* (N = 90)	.263
12	72 (80.0%)	27 (90.0%)	22 (73.3%)	23 (76.7%)	4.254 (N = 89)	.219
13	58 (64.4%)	24 (80.0%)	14 (46.7%)	20 (66.7%)	7.616* (N = 89)	.293
Mean:	57 (63.3%)	22 (73.3%)	15 (50.0%)	20 (66.7%)		

^aFor the chi square and Cramer's V statistics, those subjects who responded "don't know" are excluded and treated as missing cases.

^bScenario 8 is statistically significant partly because 5 Korean-American respondents regarded the scenario as nonabusive whereas none of the African-Americans and only 1 Caucasian judged it as nonabusive. * $p \leq .05$; ** $p \leq .01$; *** $p \leq .001$.

respectively) than for the latter three scenarios ($V = .285, .263$, and $.293$). A most striking group difference was evident in regard to Scenario 3, which describes a daughter (daughter-in-law, for Korean-Americans) who was frustrated by her mother's (mother-in-law's) embarrassing behavior whenever she invited guests over, and for which she gave her tranquilizers but falsely told her that they were doctor-ordered medication. Sixty-three percent of the African-American respondents regarded the scenario as an elder abuse case, whereas only 36% and 10% of Caucasian and Korean-American respondents, respectively, viewed it as an abusive situation.

Much of the significant group differences were attributed to the substantially smaller percentage of Korean-American respondents' perceptions of the scenarios as abusive. Only with regard to two scenarios (Scenarios 9 and 10) did more Korean-American respondents judge the cases as elder abuse than the other two groups. In contrast, except for Scenarios 7 and 11, the percentage of African-American respondents who perceived the scenarios as abusive was higher (Scenarios 1, 3, 4, 6, 12, and 13) or the same compared with the other two groups. The overall average percentage of the respondents who perceived each of the 13 scenarios as abusive was 73% for African-Americans, 50% for Korean-Americans, and 67% for Caucasians. Therefore, considerable ethnic group differences exist in the perceptions of elder abuse, and the Korean Americans on the average were less sensitive to or more tolerant of potentially abusive situations than the other two groups.

To capture each respondent's overall perception of the 13 scenarios and to summarize the overall ethnic group differences, the Elder Abuse Perception Scale was constructed. The scale scores were computed by recoding and scoring "yes, an abuse" as 2, "no, not an abuse" as 0, "don't know" as 1, and then summing the recoded scores for the 13 scenarios. Thus, a maximum scale score of 26 would be ob-

Table 3. Summary of Elder Abuse Perception Scale Scores^a

	African American	Korean American	Caucasian American	Total
N	30	30	30	90
Range	13-24	7-20	9-26	7-26
Standard deviation	2.57	3.65	4.25	4.29
Mean	19.23	13.47	17.67	16.79
Three group one-way analysis	F Ratio = 21.07, $p \leq .001$			

^aThe scale scores were computed by recoding and scoring "yes" as 2, "no" as 0, and "don't know" as 1, and then summing the recoded scores for the 13 scenarios. Thus, a maximum scale score of 26 would be obtained if a respondent perceived all of the 13 scenarios as abusive and a minimum score of 0 if the respondent perceived none of the scenarios as abusive.

tained if a respondent viewed all 13 scenarios as abusive and a minimum score of 0 if all were viewed as nonabusive. As shown in Table 3, the scale scores ranged from 7 to 26, suggesting significant individual differences. Comparison of the three groups' standard deviations further indicated the Caucasian Americans as having the greatest within-group variation ($SD = 4.25$) and African-Americans having the smallest variation ($SD = 2.57$) in their perceptions. The average scale score was 19.23 for African-American, 17.67 for Caucasian American, and 13.47 for Korean-American respondents. In fact, the group differences in their perception scale scores, measured by a one-way analysis, were statistically significant (F ratio = 21.07, $p \leq .001$).

The study's findings also suggest an interesting decision pattern of the elderly respondents concerning elder abuse cases; that is, they weigh the intention of the person involved, the circumstantial factors, and the specific nature of the behavioral act, which may or may not give rise to elder abuse. For example, with regard to Scenarios 2, 3, and 4, only 10%, 37%, and 27%, respectively, of the respondents viewed them as elder abuse cases despite the fact

that those scenarios involved the behaviors of force-feeding, medication and tranquilizers, and tying the elderly person in the bed. In fact, many respondents indicated that the caregiver's treatment of the elderly in those scenarios was not abusive because they were driven by the caregiver's good intention to protect, rather than to harm, the elderly, or because the elderly person was uncooperative or there were no other practical, available alternatives.

Another finding is that among the respondents who perceived each scenario as elder abuse, group differences in ratings of the severity of abuse were significantly less apparent than their differences in the perception of abuse. Significant group differences in their rating of the severity of abuse were found only in two cases, Scenarios 6 and 9. In the case of Scenario 6, 21 out of 27 (78%) African-Americans, 1 out of 7 (14%) Korean-Americans, and 11 out of 25 (44%) Caucasian Americans who judged the scenario as abusive also rated it as severe abuse. For Scenario 9, 12 out of 25 (48%) African-Americans, 15 out of 26 (57%) Korean-Americans, compared with 6 out of 24 (25%) Caucasian Americans, who perceived the situation as abusive rated it severe. The group differences in rating of severity were significant at $p = .002$ for Scenario 6 and at $p = .048$ for Scenario 9. On the average, 48.6% of the respondents who perceived each of the 13 scenarios as abusive also rated them as severe abuse. Scenario 5, which was judged as an elder abuse situation by the highest number of respondents (83 respondents, or 92%), was also rated as a severe abuse case by the highest percentage of those who initially viewed it as abusive (92%). In sharp contrast, only 2 out of 21 respondents (9.5%) who perceived Scenario 7 as abusive rated it a severe case.

Table 4 presents the results of bivariate analyses of the respondents' intention to seek help by their perception of each scenario as abusive or nonabusive. The number of respondents who would have

sought help, had they been in the situation of each scenario, varied substantially from scenario to scenario, from 79, or 88%, of the total respondents for Scenario 10 to 8, or 9%, of the total for Scenario 7. The data also clearly indicate that perceiving a situation as abusive or problematic is a strong predictor of the person's intention to seek help. An average of approximately two-thirds of the respondents who perceived the scenarios as abusive would seek help, whereas an average of about one-third of those who did not perceive them as abusive would seek help. For all except Scenario 7, the percentage of the respondents who indicated their intention to seek help was substantially higher among those who regarded the situations as abusive than among those who did not. A most striking difference was found in Scenario 11 in that 80% of those who perceived the situation as abusive, and only 19% of those who did not see it as abusive, indicated their intention to seek help. In fact, the respondents' perception of whether the situations involved elder abuse or not was a significant predictor of their intention to seek help with regard to 9 of the 13 scenarios.

Table 5 further suggests that significant differences exist among the three ethnic groups in their intention to seek help with regard to seven scenarios (Scenarios 1, 2, 3, 6, 8, 9, and 11). Again, the significant group differences in all seven cases were largely due to the substantially lower percentage of Korean-American respondents who indicated their intention to seek help. As a whole, an average of only 36% of the Korean-Americans, as compared with 63% of African-Americans and 62% of Caucasian Americans, would have sought help had they been the elder in the scenarios.

In order to capture each respondent's overall help-seeking decision concerning the 13 scenarios and to summarize the overall ethnic group differences, the Help-seeking Decision Scale was constructed. The scale scores were computed by recoding and scoring "yes, will seek help" as 2, "no, will not seek help" as 0, and "don't know" as 1, and then summing the recoded scores for the 13 scenarios. Thus, a maximum scale score of 26 would be obtained if a respondent would seek help in all of the 13 scenarios and a minimum score of 0 if the respondent would seek help in none of the scenarios. As shown in Table 6, the range of the scale scores, which varied from 1 to 25, revealed great individual differences in their decision to seek help. Comparison of the three groups' standard deviations further indicated that African-Americans had the greatest ($SD = 4.47$) and Korean-Americans had the smallest ($SD = 3.79$) within-group variation in their help-seeking decision in the 13 scenarios. The average scale score was 15.63 for African-American, 15.00 for Caucasian American, and 8.67 for Korean-American respondents. This finding is not surprising considering the logic of the two major previous findings: Korean-American elders were far less likely to perceive a given situation as abusive, and the decision to seek help was heavily influenced by perception of the situation as abusive. The group differences in the help-seeking decision

Table 4. Bivariate Analysis of Intention to Seek Help by Perception of Elder Abuse^a

Scenario	Yes, seek help	Abuse		Chi square (df = 1)
	% of total (frequency)	Yes	No	
1	62.2% (56)	68.8%	23.1%	8.05**
2	33.3 (30)	77.8	30.7	5.85*
3	34.4 (31)	71.0	17.6	21.10***
4	47.8 (43)	70.8	41.0	5.00*
5	61.1 (55)	67.5	50.0	.27
6	55.6 (50)	75.9	21.4	20.81***
7	8.9 (8)	9.5	8.8	.00
8	70.0 (63)	76.9	40.0	1.72
9	74.4 (67)	81.1	44.4	4.20*
10	87.8 (79)	94.5	69.2	5.64*
11	66.7 (60)	80.3	18.8	20.31***
12	43.3 (39)	49.3	23.5	2.72
13	32.2 (29)	41.4	16.1	4.77*
Mean:	52.2% (47)	67.7%	36.2%	

^a'Don't know' responses were treated as missing values and excluded in the computation of chi square.

* $p \leq .05$; ** $p \leq .01$; *** $p \leq .001$.

Table 5. Bivariate Analysis of Intention to Seek Help by Ethnicity

Scenario	N ^a	Percentage and Frequency of those who would seek help			Chi square (df = 2)
		African-American	Korean-American	Caucasian	
1	90	76.7 (23)	33.3 (10)	76.7 (23)	15.98***
2	88	36.7 (11)	6.9 (2)	58.6 (17)	17.40***
3	86	62.1 (18)	3.3 (1)	44.4 (12)	23.27***
4	88	43.3 (13)	50.0 (15)	53.6 (15)	.63
5	87	79.3 (23)	56.7 (17)	53.6 (15)	4.90
6	87	85.7 (24)	23.3 (7)	65.5 (19)	24.21***
7	87	6.7 (2)	14.3 (4)	6.9 (2)	1.28
8	86	83.3 (25)	40.7 (11)	93.1 (27)	21.96***
9	89	86.7 (26)	41.4 (12)	96.7 (29)	27.37***
10	88	90.0 (27)	86.2 (25)	93.1 (27)	.75
11	87	82.8 (24)	41.4 (12)	82.8 (24)	15.47***
12	89	53.3 (16)	34.5 (10)	43.3 (13)	2.13
13	90	30.0 (9)	33.3 (10)	33.3 (10)	.10
Mean:		62.8 (18.5)	35.8 (10.5)	61.7 (17.9)	

^aN refers to the number of cases used to compute the chi-square statistics, after excluding the cases with "Don't know" responses.

* $p \leq .05$; ** $p \leq .01$; *** $p \leq .001$.

Table 6. Summary of Help-Seeking Decision Scale Scores^a

	African-American	Korean-American	Caucasian American	Total
N	30	30	30	90
Range	2-23	1-16	9-25	1-25
Standard deviation	4.47	3.79	3.93	5.12
Mean	15.63	8.67	15.00	13.10
Three group one-way analysis	F Ratio = 26.83, $p \leq .001$			

^aThe scale scores were computed by recoding and scoring "yes, will seek help" as 2, "no, will not seek help" as 0, and "don't know" as 1, and then summing the recoded scores for the 13 scenarios. Thus, a maximum scale score of 26 would be obtained if a respondent would seek help in all of the 13 scenarios and a minimum score of 0 if the respondent would seek help in none of the cases.

scale scores, measured by a one-way analysis, were statistically significant (F ratio = 26.83, $p \leq .001$).

In comparing the findings on the perception of elder abuse (Tables 2 and 3) and help-seeking patterns (Tables 4, 5, and 6), it is also evident that for all three ethnic groups, the overall average percentage of those who would seek help was somewhat lower than the percentage of those who identified the scenarios as elder abuse cases (63% vs. 73% for African-Americans, 36% vs. 50% for Korean-Americans, and 62% vs. 67%, for Caucasian Americans). In addition, although the overall average percentages of African-Americans (63%) and Caucasian Americans (62%) who would seek help are remarkably close, the differences between the two groups with regard to Scenarios 2, 3, 5, and 6 must not be overlooked. For example, in the situation of Scenario 2, 37% of African-American and 59% of Caucasian American respondents indicated their intention to seek help. On the other hand, in the case of Scenario 5, 79% of African-American and 54% of Caucasian American respondents stated that they would seek help.

In order to understand the similarities and differences in help-seeking patterns among the three ethnic groups, an open-ended question was asked of those

respondents who indicated their intention to seek help to identify to whom or where they would have turned for help. The question initially generated 18 sources of help, including husband, child, sibling, neighbor, social worker, church minister, police, doctor, nursing home, bank or accountant, and telephone company. When the responses to all of the 13 scenarios were analyzed and compared among the different ethnic groups, significant differences in help-seeking patterns were apparent. Among the respondents who would seek help, only 17.7% of the African-American elderly would turn to family members or other relatives for help, whereas the percentages for the other two groups were substantially higher — 55.5% for the Korean-American and 30.1% for the Caucasian American elderly. In other words, on the average, more than 80% of the time African-Americans responded that they would turn to someone other than family members and relatives for help. This finding is in sharp contrast with previous research findings on general help-seeking patterns of the African-American population, which had identified family and relatives as the primary sources of help. In addition, the police, 911, and lawyers constituted 23% of the African-Americans' aggregate response as sources for help, whereas they accounted for 5% and 13% for Korean-Americans and Caucasian Americans, respectively. Social workers, social service agencies, and nursing homes constituted an average of only 6% of the Caucasian American responses as sources for help, whereas substantially higher percentages of the other groups (20.2% of the African-Americans and 21.2% of the Korean-Americans) identified them as such.

To utilize a statistical test of significance appropriate for the study's sample size and to summarize the group differences in help-seeking patterns for each scenario, the 18 sources of help were divided into two categories — informal and formal sources of help. The informal sources included family members, relatives, friends, neighbors, church ministers, coworkers, and visitors, and the formal ones included social workers, medical professionals, law-

yers, the police, banks, and telephone companies. The results are presented in Table 7. With regard to the first scenario, 56 of the 90 respondents indicated both their intention to seek help and sources of help. Furthermore, 47.8% of 23 African-Americans, 70% of 10 Korean-Americans, and 60.9% of 23 Caucasian respondents who would seek help indicated that they would have turned to informal sources of help in the situation. There were significant group differences in the likelihood of utilizing informal versus formal sources of help in 8 of the 13 scenarios. Cramer's V also suggests that in Scenarios 4, 5, 6, 12, and 13, ethnicity was an especially strong predictor for which of the two sources of help the respondents were likely to turn to. The overall average percentage of respondents who would rely on informal rather than formal help was 74.2% for the Korean-

Americans, 59.8% for the Caucasian Americans, and 35.8% for the African-Americans.

There existed substantial within-group variations, as well as between-group differences, in elderly women's reliance on informal help. As shown in the table, it ranged from 7.7% in Scenario 9 to 70.6% in Scenario 3 for African-Americans; from 26.7% in Scenario 4 to 100% in Scenarios 3, 7, 12, and 13 for Korean-Americans; and from 31.0% in Scenario 9 to 86.7% in Scenario 4 for Caucasian Americans. This suggests that the group differences in overall help-seeking patterns must not be overgeneralized, since to whom or where to turn for help seemed to depend on the nature of a given situation. For example, it is notable that with regard to Scenarios 4 and 8, Korean-American respondents' likelihood of utilizing informal help was the lowest among the three groups.

Table 7. Help-seeking Patterns (Informal vs. Formal^a) Among the Three Ethnic Groups

Scenario	Total N ^b	Informal sources as percentage of help sources			Chi square (df = 2)	Cramer's V
		African-American	Korean-American	Caucasian		
1	56	47.8% (23)	70.0% (10)	60.9% (23)	1.62	.17
2	30	27.3 (11)	50.0 (2)	52.9 (17)	1.83	.25 ^c
3	30	70.6 (17)	100.0 (1)	50.0 (12)	1.88	.25 ^c
4	42	50.0 (12)	26.7 (15)	86.7 (15)	11.05**	.51
5	55	21.7 (23)	82.4 (17)	46.7 (15)	14.41***	.51
6	49	21.7 (23)	71.4 (7)	78.9 (19)	14.99***	.55
7	8	50.0 (2)	100.0 (4)	50.0 (2)	2.67	.58 ^c
8	62	45.8 (24)	36.4 (11)	66.7 (27)	3.74	.25
9	68	7.7 (26)	69.2 (13)	31.0 (29)	15.87***	.48
10	79	44.4 (27)	84.0 (25)	74.1 (27)	10.11**	.36
11	59	34.8 (23)	75.0 (12)	70.8 (24)	8.11*	.37
12	40	23.5 (17)	100.0 (10)	38.5 (13)	15.40***	.62
13	30	20.0 (10)	100.0 (10)	70.0 (10)	14.07***	.68 ^c
Mean:	46.8	35.8%	74.2%	59.8%		

^aInformal sources for help include husband, child, relative, friend, neighbor, church minister, visitor, and coworker. Formal sources include social worker or social service agency, police, 911 and other authorities, medical professional, lawyer, nursing home, bank or accountant, and telephone company.

^bN refers to the total number of respondents who indicated their intention to seek help and also identified who they would turn to for help.

^cThe 3 × 2 crosstable contains 50 or greater percent of its cells with expected frequency smaller than 5.

* $p \leq .05$; ** $p \leq .01$; *** $p \leq .001$.

Table 8. Zero-Order Correlations Between Variables

Variables	1	2	3	4	5	6	7	8	9
1. Abuse, yes ^a	—								
2. Help, yes ^a	.50***	—							
3. Age	-.24*	-.06	—						
4. Marital status ^b	.09	.09	-.21*	—					
5. Educational level ^c	.20	.19	-.12	-.01	—				
6. Monthly income ^d	.40***	.24*	-.31**	.15	.46***	—			
7. Number of children	-.00	-.15	-.00	.06	-.00	-.11	—		
8. Number of children in Minnesota	.08	.13	-.13	.11	-.11	.08	.73***	—	
9. Number of persons in household	.17	.11	-.31**	.35***	.03	.15	.30**	.39***	—

^aThe two variables, "Abuse, yes" and "Help, yes," were computed as follows: in response to the two related questions, (1) whether a described scenario involved abuse; (2) whether the respondent would ask or call someone for help, "yes" was recoded as 2, no equalled 0, and "don't know" was 1. Using this coding scheme, responses to all of the 13 scenarios were then summed to arrive at the aggregate scores, ranging from 26 to 0.

^bMarital status was recoded as follows: 1 = currently married or partnered, 0 = never married, widowed, divorced, or separated.

^cEducational level was grouped into 8 categories, ranging from (1) less than high school to (8) post-college graduate.

^dMonthly income was coded into 9 categories, ranging from (1) less than \$500 to (9) more than \$4,000. The correlations between income and other variables are based on 72 respondents who provided income information.

* $p \leq .05$; ** $p \leq .01$; *** $p \leq .001$.

Finally, Table 8 presents the Pearson coefficients of zero-order correlations between selected variables for all of the respondents. Focusing on the perception of elder abuse and likelihood of seeking help variables, it shows that whether the 13 scenarios were perceived as elder abuse, overall, was significantly associated with age and income. The younger elders ($r = -.24$) with higher incomes ($r = .40$) were more likely to perceive the same situation as abusive. The elderly women's likelihood of seeking help was significantly correlated with the perception of whether the situations involved abuse ($r = .50$) and income levels ($r = .24$). Marital status, educational level, the number of children in Minnesota or elsewhere, and the number of persons living in the same household were not significant variables for either perceptions of elder abuse or likelihood of seeking help.

Discussion

It must be pointed out that the generalizability of this study's findings is limited due to the small sample size, use of a nonprobability sampling method, and exclusion of male elders from the sample. This suggests the need for replicating the study with a large, representative sample of the elderly across gender, race/ethnicity, age, socioeconomic status, living arrangements, and location of residence. Such a study will be extremely useful not only for assessing the ethnic differences and similarities in perceptions of elder abuse and help-seeking patterns, but also for identifying the characteristics of the elderly who are at high risk of elder abuse.

Despite the limitations, this study raises a number of questions for practitioners and researchers in the field of elder mistreatment. First, to what extent should the elderly's own judgment about a given situation and the desirable course of the action be accepted when they are in direct conflict with the professional's assessment of the situation and recommendation for appropriate intervention? In other words, if the elderly persons' perceptions of elder abuse and their help-seeking behaviors reported in this study differed considerably from practitioners' working definition of elder abuse and their judgments regarding appropriate help-giving interventions, what should be the desirable process by which the differences might be resolved in order to ensure the safety, dignity, and well-being of the elderly clients? If the elderly's own perceptions and desires are considered important for better conceptualizations and classification systems of elder abuse, there is a great need for future research to involve both the practitioners and the elderly. This is because their input is equally important in developing the operational definition of elder abuse that will result in more consistent classification of elder abuse cases and interventions that are more appropriate and responsive to the needs of the elderly and their families.

Second, what are the implications of the ethnic or cultural differences in perception of elder abuse and help-seeking behaviors? What if a Korean-American elderly person sees a situation as not being abusive or

problematic or as resolvable in a family context, when the practitioner's training in identification and intervention defines the same situation as involving elder abuse or maltreatment, requiring further agency involvement? Such different views of the same situation may result in a clash between the client and the worker. The question, then, is to what extent the potential cultural differences in perception and help-seeking behavior should be considered in identifying elder abuse cases and designing appropriate intervention strategies. Should there be two classification systems of elder abuse, one that is universally applicable and another that is culturally appropriate for each ethnic group?

As found in the study, the Korean-American elderly women tended to define elder abuse in a more narrow context and were significantly less likely to seek help compared with the other groups. In fact, many Korean-American respondents indicated their reluctance to reveal "family shame" to others and their fear of creating conflict among their children and relatives (as a consequence of telling them about the abusive situations) as two major reasons for not wanting to talk to anyone about the potential problems. It can be argued that their desire to maintain peace in the family at the expense of their suffering must be understood and respected in the context of their culture, which emphasizes family harmony over individual well-being, which denotes some degree of human suffering as a virtue, and which dictates enduring and keeping one's problem to oneself, rather than exposing the problem to others, as a desirable behavior. One can argue, on the other hand, that it goes beyond the reason of culture to ignore the consequent likelihood of the group being at a high risk of elder abuse, pointing out that their narrowly drawn perception of elder abuse and restraining help-seeking behavior are indicative of their need for reorientation and better information about what constitutes elder abuse and how to deal with it, including how to use available services.

We conclude by introducing two major research questions for future study: 1) To what extent are the elderly's perception of elder abuse and their help-seeking behavior consistent with the practitioner's judgment of abuse and appropriate help-seeking behavior?; and 2) What are the similarities and differences among diverse populations in their perceptions of the problem and appropriate approaches to deal with the problem? Considering the lack of research on the topic of this study, it will be extremely useful to examine the qualitative aspects of how culture influences the definitions of elder abuse and the resultant interventions.

References

- Asbury, J. (1987). African-American women in violent relationships: An exploration of cultural differences. In R. Hampton (Ed.), *Violence in the black family: Correlates and consequences* (pp. 89-106). Lexington, MA: Lexington Books.
- Blanton, P. G. (1989). Zen and the art of adult protective services: In search of a unified view of elder abuse. *Journal of Elder Abuse and Neglect*, 1(1), 27-35.
- Brown, A. S. (1989). A survey on elder abuse at one Native American tribe. *Journal of Elder Abuse and Neglect*, 1(2), 17-35.

- Cazenave, N. A. (1979). Family violence and aging blacks: Theoretical perspectives and research possibilities. *Journal of Minority Aging*, 4, 99–108.
- Cazenave, N. A. (1981, October). *Elder abuse and black Americans: Incidence, correlates, treatment and prevention*. Paper presented at the Annual Meeting of the National Council on Family Relations, Milwaukee.
- Cazenave, N. A., & Straus, M. (1979). Race, class, network embeddedness and family violence: A search for potent support systems. *Journal of Comparative Family Studies*, 10(3), 280–300.
- Chau, K. L. (1989). Sociocultural dissonance among ethnic minority populations. *Social Casework*, 70(4), 224–230.
- Choi, H. (1985, August). *Selected characteristics on population and aging in the Republic of Korea*. Paper presented at Workshop on Population Aging, Sixteenth Summer Seminar on Population, East-West Population Institute, Honolulu.
- Fredriksen, K. I. (1989). Adult protective services: Changes in the introduction of mandatory reporting. *Journal of Elder Abuse and Neglect*, 1(2), 59–71.
- George, L. (1988). Social participation in later life: Black-white differences. In J. S. Jackson (Ed.), *The black American elderly*. New York: Springer.
- Gibson, R. C. (1989). Minority aging research: Opportunities and challenges. [Guest editorial.] *Journal of Gerontology Social Sciences*, 44, S2–3.
- Hall, P. A. (1986). Minority elder maltreatment: Ethnicity, gender, age, and poverty. *Journal of Gerontological Social Work*, 9(4), 53–72.
- Hampton, R. L., Gelles, R. J., & Harrop, J. W. (1989). Is violence in black families increasing? A comparison of 1975 and 1985 national survey rates. *Journal of Marriage and the Family*, 51, 969–979.
- Hudson, M. (1989). Analyses of the concepts of elder mistreatment: Abuse and neglect. *Journal of Elder Abuse and Neglect*, 1(1), 5–27.
- Hwalek, M. B., & Sengstock, M. C. (1987). Assessing the probability of abuse of the elderly: Toward development of a clinical screening instrument. *Journal of Applied Gerontology*, 5(2), 153–173.
- Johnson, C. L., & Barer, B. M. (1990). Families and networks among older inner-city blacks. *The Gerontologist*, 30, 726–733.
- Johnson, T. (1986). Critical issues in the definition of Elder Maltreatment. In K. A. Pillemer & R. S. Wolfe (Eds.), *Elder abuse: Conflict in the family*. Dover, MA: Auburn House.
- Johnson, T. (1989). Elder mistreatment identification instruments: Finding common ground. *Journal of Elder Abuse and Neglect*, 1(4), 15–37.
- Koh, J. Y., & Bell, W. G. (1987). Korean elders in the United States: Intergenerational relations and living arrangements. *The Gerontologist*, 27, 66–71.
- Leigh, J. (1989). *Issues in working with ethnic minorities*. Unpublished manuscript. University of Washington School of Social Work.
- Liu, W. T. & Yu, E. (1985). Asian/Pacific American elderly: Mortality differentials, health status, and use of health services. *Journal of Applied Gerontology*, 4(1), 35–64.
- Long, K. A. (1986). Cultural considerations in the assessment and treatment of intra familial abuse. *American Orthopsychiatric Association*, 56(1), 131–136.
- Mindel, C., Wright, R., & Starrett, R. (1986). Informal and formal health and social support systems of black and white elderly. *The Gerontologist*, 26, 279–285.
- Mitchell, J., & Register, J. C. (1984). An exploration of family interaction with the elderly by race, socioeconomic status, and residence. *The Gerontologist*, 24, 48–54.
- Ortega, S., Crutchfield, R., & Rushing, W. A. (1983). Race differences in elderly personal well-being. *Research on Aging*, 5, 101–118.
- Pillemer, K. A., & Finkelhor, D. (1988). The prevalence of elder abuse: A random sample survey. *The Gerontologist*, 28, 51–57.
- Ralston, P. A. (1984). Senior center utilization by black elderly adults: Social attitudinal and knowledge correlates. *Journal of Gerontology*, 30, 224–229.
- Salend, E., Kane, R. A., Satz, M., & Pynoos, J. (1984). Elder abuse reporting: Limitations of statutes. *The Gerontologist*, 24, 61–69.
- Smerglia, V. L., Deimling, G. T., & Barresi, C. M. (1988). Black/white family comparisons in helping and decision making networks of impaired elderly. *Family Relations*, 37, 305–309.
- Sokolovsky, J. (1985). Ethnicity, culture and aging: Do differences really make a difference? *Journal of Applied Gerontology*, 4(1), 6–17.
- Sorensen, C. (1986). Migration, the family, and the care of the aged in rural Korea: An investigation of a village in the Younso region of Kangwon Province 1918–1983. *Journal of Cross-Cultural Gerontology*, 1, 139–161.
- Sourcebook of Criminal Justice Statistics*. (1982). Washington, DC: U.S. Government Printing Office.
- Steinmetz, S. K. (1988). *Duty bound: Elder abuse and family care*. Newbury Park, CA: Sage.
- Steinmetz, S. K. (1990). Elder abuse: Myth and reality. In T. H. Brubaker (Ed.), *Family relationships in later life*. Newbury Park, CA: Sage.
- Straus, M., & Giller, R. (1986). Societal changes and family violence from 1975 to 1985 as revealed by two national studies. *Journal of Marriage and Family*, 48, 465–475.
- Sue, S., & Zane, N. (1987). The role of culture and culture techniques in psychotherapy: A critique and reformulation. *American Psychologist*, 42(1), 37–45.
- Taylor, R., & Chatters, L. (1986). Patterns of informal support to elderly black adults: Family, friends, and church members. *Social Work*, 31(6), 432–438.
- Williams, O. J., & Griffin, L. W. (1991). Elder abuse in the black family. In R. L. Hampton (Ed.), *Black family violence: Current research and theory* (pp. 117–127). Lexington, MA: Lexington Books.

Appendix Thirteen Scenarios Used in the Study

Scenario 1: Elizabeth is a 78-year-old widow who lives in her own single family home. George, her 45-year-old son, has lived with Elizabeth since he lost his job 5 years ago. Elizabeth told her closest friend that her son threw a frying pan at her when she burned some food. She also said that this was the third time he threw things at her.

Scenario 2: Frances is 72 years old. She suffered a stroke and, as a result, is paralyzed on her left side and confined to a wheelchair. She lives with her married daughter. For the last 2 years, she has repeatedly told her daughter that she has no desire to live and refuses to eat or take her medication. Every day her daughter forces her to eat and to take her medication.

Scenario 3: Karen, a 73-year-old widow, has been depressed and has felt emotionally unstable since her husband died. Three years ago, she moved into her daughter's house. She often cries, screams, yells, and throws things at her daughter. One time, she embarrassed her daughter and her guests at the dinner table by yelling at everyone there. Since then, whenever her daughter invites guests to their home, she gives Karen tranquilizers, telling her that the doctor ordered the medication because it is good for her. The daughter does not tell her mother that they are tranquilizers.

Scenario 4: Lisa, a 75-year-old, is unwell and unable to walk. However, she keeps trying to walk. It got to the point

that she would not stay in bed or even in a wheelchair but would stand up and fall. On several occasions, she tried to get out of bed and fell flat on her face. She refuses to move into a nursing home or a hospital. She lives with her married daughter. Her daughter feels that she cannot provide 24-hour care because she also has to care for her own family. So whenever her daughter cannot assist her mother to get out of bed or to walk, she ties her mother in bed or in a chair to keep her in the bed or in the chair.

Scenario 5: Mary, a 75-year-old widow, was diagnosed with Alzheimer's disease 2 years ago in a local hospital. Since then, she has lived with her daughter and her son-in-law, Richard, who volunteered to move into Mary's house to take care of her. Richard owns a photography studio. One day, when Mary's daughter was out of town, Richard persuaded Mary to take off all her clothes and took pictures of her in the nude. He later showed those pictures to his friends.

Scenario 6: Margaret, a 75-year-old widow, is senile. She lives with her daughter's family. Although her daughter gives her three big meals a day, she always complains that her daughter does not feed her and that she is always hungry. Her daughter is worried that if she does not control her mother's eating, her mother will eat too much and harm herself. So she threatened to poison her mother's food if her mother attempted to eat more than what she was given.

Scenario 7: Ruth, 71 years old, lives with her husband, Mark. One morning, she accidentally stepped on and broke Mark's only eyeglasses. Mark was very angry and yelled that Ruth never learned to be careful.

Scenario 8: Kim, a 73-year-old widow, suffered a stroke and is paralyzed on her right side. Since she needed someone to care for her, she moved into her married daughter's house. Her daughter, Karen, had suffered a lot as a child because her mother did not take care of her and blamed everything on her. One time, her mother ran away and abandoned her for 2 years. Karen was born out of wedlock. Karen often reminds her how bad a parent she was in the past. Karen always yells at her mother, gives her only one meal a day, and does not clean Kim's room. Karen tells her mother that she does not deserve any better treatment.

Scenario 9: Jane, a 72-year-old widow, has had difficulties in managing her finances since her husband died. Her husband had handled the family finances, and she was too afraid to learn about financial matters. So she asked her son, Bob, to manage her finances, and she took all of her money, about \$150,000, out of her various bank accounts and placed it in an account in Bob's name. Bob agreed to authorize payment whenever his mother wanted any of the money. After the money was entrusted to him, Bob sometimes refused to authorize payment for money his mother requested.

Scenario 10: Beatrice, 73 years old, lives in a one-bedroom apartment alone. Her hearing has deteriorated so badly that she cannot hear the telephone. Three months ago, she asked her daughter to make an appointment with a doctor so she could get a hearing aid. Her daughter promised to do so, but her daughter never made the appointment or took Beatrice to a doctor, saying she was always too busy.

Scenario 11: Martha, a 73-year-old widow, had a severe stroke 10 years ago and, as a result, she is paralyzed on both sides of her body. Since then, she has lived with her son's family. She requires 24-hour supervision. Although she receives about \$500 a month in welfare benefits, the money is far from adequate to cover the cost of the personal care services she receives. Her son and daughter-in-law work full-time and make about \$4,000 a month after taxes. Her son's family spends an average of \$800 a month for her care. Usually, they take good care of her. But, sometimes, whenever her son is drunk, he cries and yells at his mother, telling her to kill herself so that he could live like his friends, saving money and buying a home.

Scenario 12: Doris, a 70-year-old widow, lives alone in a one-bedroom apartment. Kristin, her daughter, comes to her apartment almost every day since her boyfriend moved to New York. At first, Doris was happy to see Kristin often, but she became angry at her daughter, who seemed to come to her mother's apartment to make long-distance calls to her boyfriend. Doris was getting \$400-a-month telephone bills. One day, when Kristin was on the phone long distance, Doris took the phone out of Kristin's hand and hung it up. Kristin was very upset. She yelled at her mother, "You old witch!"

Scenario 13: Lucy, a 68-year-old, lives with her husband, Charles. Lucy works full-time at a drug store, and her husband receives Social Security benefits of \$460 a month. Charles is a quiet man and has never hit her or done anything violent. But Charles sometimes takes Lucy's money without asking or telling her in advance. Even when Lucy asked him where he spent the money, he would not tell her. Lucy also asked him not to take any of her money without her permission. Charles ignores her and still sometimes takes Lucy's money without asking.