# Adult Maltreatment

Report | 2021











### **About This Report**

#### Federal Disclaimer

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#### Electronic Access

This report is available on the Administration for Community Living website at <a href="https://namrs.acl.gov/">https://namrs.acl.gov/</a>

#### For Questions and More Information

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### Acknowledgements

In communities around the country, adult protective services (APS) staff, administrators, and advocates work diligently to ensure the safety and well-being of adults who are maltreated by others or who are unable to care for themselves. Understanding the nature and extent of adult maltreatment—and the ways APS programs respond to it—is critical to enhancing the effectiveness of APS programs. In furtherance of that objective, we are pleased to release the Adult Maltreatment Report 2021.

The U.S. Department of Health and Human Services, Administration for Community Living (ACL), in partnership with the Adult Protective Services Technical Assistance Resource Center (APS TARC), is committed to advancing the APS field through data analysis, evaluation, and technical assistance—all to support improved services and better outcomes in APS programs. The National Adult Maltreatment Reporting System (NAMRS) is a key part of this effort. This is the sixth year the Adult Maltreatment Report has been issued, and all U.S. states and territories contributed by submitting information about their APS programs to NAMRS.

This report would not be possible without the time, effort, and dedication of state and local APS field staff who document their cases, program staff who map agency documentation to NAMRS, information technology staff who generate and upload reports to NAMRS, and other agency personnel who lead and support them. It is important to strengthen the collective understanding of adult maltreatment as a means for improving the APS system, and we will continue working to promote the safety and well-being of maltreated adults across our nation.

We gratefully acknowledge the efforts of all involved to make this report possible.

Sincerely,

The APS TARC Team

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## Introduction

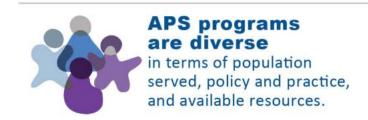
Adult protective services (APS) programs serve seniors and adults with disabilities through investigating, and in some cases providing social services in response to reports of abuse, neglect, and exploitation (referred to as maltreatment in this report). There are 56 APS programs in the United States, one in each of the 50 states, the District of Columbia, and every U.S. territory (collectively referred to as states hereafter).

There are three primary components to APS programs:

- Receiving reports of adult maltreatment
- Investigating reports of adult maltreatment
- Providing, arranging for, or facilitating services, including case planning and other casework services, to prevent or mitigate harm from maltreatment

State laws governing APS programs create diversity in the population eligible for services, program policies and practices, the types of maltreatment investigated, and the resources that are available. To increase public and professional understanding about adult maltreatment and strengthen the social supports needed to prevent it, the Administration for Community Living (ACL) collects data from APS programs through the National Adult Maltreatment Reporting System (NAMRS). The Adult Protective Services Technical Assistance Resource Center (APS TARC), funded by ACL, provides training and technical assistance to states to assist with their NAMRS submissions. In addition to APS TARC and NAMRS, ACL operates a larger system of programs and resource centers to support older adults and adults with disabilities. More information about these resource centers and programs can be found at <a href="https://apstarc.">https://apstarc.</a> acl.gov.

NAMRS is the only comprehensive national reporting system for state APS programs and is still relatively new. ACL began collecting NAMRS data annually in federal fiscal year (FFY) 2016. As a result of data system enhancement funding from ACL and the technical assistance to states provided by the APS TARC, every state participates in NAMRS. This report provides an overview of adult maltreatment as reported to APS programs across the country, using NAMRS data submitted for FFY 2021 (October 1, 2020, through September 30, 2021) unless otherwise noted.

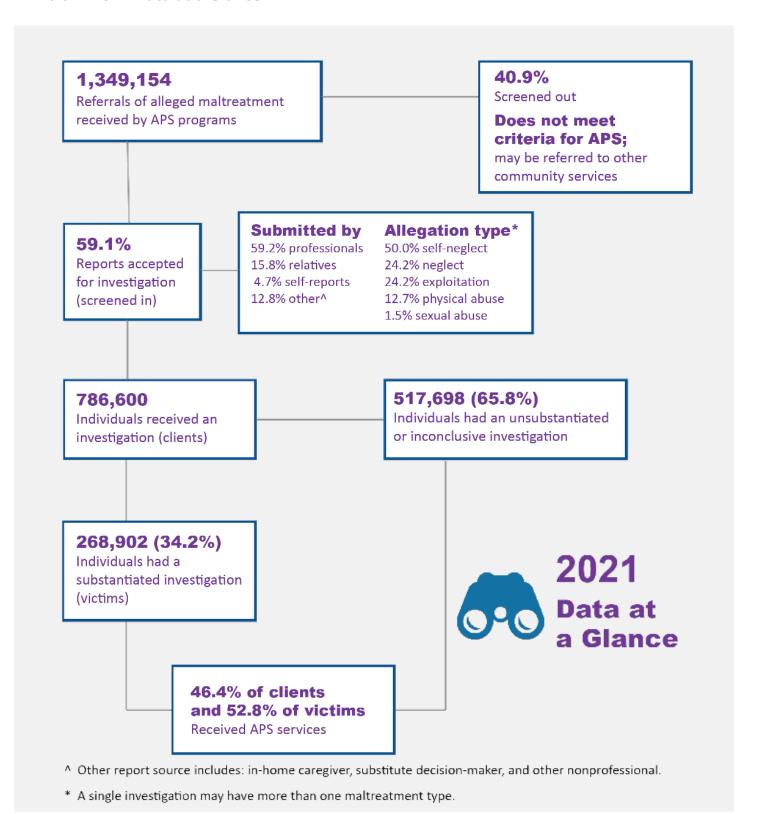


In last year's Adult Maltreatment Report, an analysis of the available FFY 2020 data showed a decrease in the numbers of APS reports and investigations in the early months of the COVID-19 pandemic (March 2020 and April 2020). That decrease was not sustained through the end of the federal fiscal year. Although some research has shown that the prevalence of adult maltreatment increased during the pandemic, this did not translate into increased reports and investigations. Data submitted to NAMRS by APS programs for FFY 2021 indicates that, while the pandemic continued into the new FFY, the numbers of APS reports and investigations were similar to pre-pandemic levels.

ACL provided first-time federal funding to state APS programs in 2021 to help with their ongoing efforts to address the impact of the COVID-19 pandemic on the individuals they serve. ACL provided guidance to states on the use of the COVID-19 funding, along with expanded technical assistance from APS TARC to support training and other state-specific APS program development goals. It may be that the policies and practices implemented by APS programs in the early months of the pandemic enabled them to safely resume typical casework interactions and activities as the year progressed. A more in-depth discussion of the impact of the pandemic on APS data is in Chapter 5 of this report. Exhibit A provides summary data and information on adult maltreatment as investigated by APS programs in FFY 2021.

### **Data Summary**

#### Exhibit A: 2021 Data at a Glance



#### **Overview of NAMRS**

NAMRS was designed to collect consistent and accurate national data on investigations and services from APS programs. To achieve this goal, NAMRS collects quantitative and qualitative data using three reporting components: Agency Component, Key Indicator Component, and Case Component. Every state submits the Agency Component, which provides an overview of the operational framework of the state's APS program, including state program contacts, summary intake data, and information on the laws and policies governing the program. States also submit summary data through the Key Indicator Component or detailed case data through the Case Component. Exhibit 1.1 shows the structure of the Key Indicator and Case Component files. Detailed descriptions of the component elements can be found in Appendix A of this report.



**Exhibit 1.1: Overview of the NAMRS Components** 

	Key Indicator Component	Case Component
Description	Summary statistics on all cases in fiscal year on 20 data elements	Case-level information on all cases in fiscal year on 54 data elements
Information Categories	Summary information on: <ul><li>Investigations</li><li>Clients/victims</li><li>Perpetrators</li><li>Maltreatment type</li><li>Client-perpetrator relationship</li></ul>	Detailed information on:     Investigations     Clients/victims     Perpetrators     Maltreatment type     Client-perpetrator relationship
Submission Process	<ul> <li>Match program's data definitions and values to NAMRS</li> <li>Create data reports</li> <li>Enter data on NAMRS website</li> <li>Validation and approval</li> </ul>	<ul> <li>Match program's data definitions and values to NAMRS</li> <li>Extract data into XML file <ul> <li>Upload data to NAMRS website</li> <li>Validation and approval</li> </ul> </li> </ul>

States able to do so upload client-level data on investigations, clients, victims, perpetrators, and the perpetrator-victim relationship through the Case Component module. The Key Indicator module is used to submit aggregate data by states unable to provide clientlevel data. Draft submissions are reviewed, validated, and approved by the APS TARC liaisons, who review, validate, and approve data submissions. Exhibit 1.2 shows the breakdown of components submitted by states.

#### The Work of APS Programs



APS programs are charged with receiving and responding to reports of adult maltreatment.

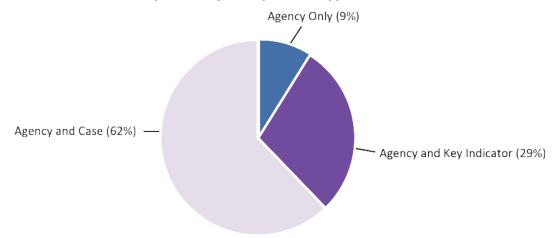


APS programs work closely with clients and a wide variety of allied professionals to maximize client safety and independence.

Each chapter of this report highlights and analyzes significant points from the NAMRS data. The following list of definitions of terms will assist in understanding and interpreting the information discussed. Data in this report provide a national snapshot of the fundamental aspects of adult maltreatment, using graphs and notes that explain the source as well as any limitations in the data. The counts and percentages reflect duplicated clients if they were involved in more than one investigation. For more information on NAMRS, including data specifications, visit https://namrs.acl.gov.

- A client is an individual who has received an investigation regarding a report of maltreatment.
- A victim is an individual who has received an investigation regarding a report of alleged maltreatment and one or more of the allegations is substantiated.
- Disabilities are physical, emotional, and mental health issues that result in limitation in activities and restrictions to fully participate at school, work, or in the community.
- A **perpetrator** is the person responsible for substantiated maltreatment allegations.
- An **investigation** is undertaken by APS to determine if allegations occurred and assess client needs with a case closure date during the reporting period.
- Maltreatment is a type of abuse, neglect, or exploitation that is alleged to have occurred.
- An allegation is a reported occurrence and type of maltreatment associated with each client that is investigated. There may be multiple allegations in an investigation.
- A case is composed of all activities and individuals related to the investigation of and response to an allegation of maltreatment.

**Exhibit 1.2: NAMRS State Participation by Component Type** 



Note: Based on information from 56 states.

#### **Overview of APS**

APS is a state-authorized social services program administered by state and local government agencies. These agencies serve adults alleged to have been maltreated by:

- Investigating allegations of maltreatment
- Coordinating with community and government partners to maximize the safety and independence of clients and victims
- Providing protective services to victims

Hotline workers, investigators, and supervisors are the staff most critical to APS programs. States report the number of full-time equivalent staff who perform hotline and investigator duties and the number of supervisors as part of their agency profiles. While most APS programs have staff dedicated solely to APS, some programs share staff with other programs or processes. For example, APS investigators may also work with the child protective services program, or supervisors may also conduct investigations.

Exhibit 1.3 displays the practice model followed by most APS programs. State-specific laws and regulations govern operations and procedures such as timeframes for a response, populations served, jurisdiction or the authority to investigate, and types of maltreatment investigated, among others.







Responsible for supervision (N=53 states)



#### **Exhibit 1.3: APS Practice Model**

	Process	Expected Results
Intake	<ul> <li>APS program receives a report of adult maltreatment</li> </ul>	<ul> <li>An intake is recorded and screened in, screened out, or referred to another agency</li> <li>Reporter is informed about investigation or alternatives to meet the client's needs</li> </ul>
Investigation	<ul> <li>Initiate investigation, prioritize risk, contact client</li> <li>Assess emergency needs, client's physical and financial health, environment, and support system</li> <li>Take emergency protective action (if needed)</li> <li>Collect information and evidence to inform service needs and next steps</li> <li>Consult with supervisor and appropriate experts and team members</li> <li>Determine finding and communicate results of the investigation</li> <li>Identify service needs and make recommendations as appropriate</li> </ul>	<ul> <li>Client's rights have been safeguarded</li> <li>Victim is safe and no longer being abused, neglected, or exploited</li> <li>Risk from perpetrator has been addressed</li> <li>Referrals have been made to other agencies and entities, e.g., regulatory agencies, law enforcement, perpetrator registries, etc.</li> </ul>
Post- investigation Services	<ul> <li>Implement service plan with client agreement</li> <li>Engage community partners through referral for services or purchase of services</li> <li>Monitor status of client and impact of services</li> </ul>	<ul> <li>Client or victim is safe with needs being met</li> <li>Victim has reduced long-term risk for abuse, neglect, or exploitation</li> </ul>
Quality Assurance	<ul> <li>Document all investigation and case management activities</li> <li>Review and approve for closure</li> <li>Conduct quality assurance process</li> </ul>	<ul> <li>Quality of investigations and provision of services is maintained or improved</li> </ul>

#### **How APS Becomes Involved**

APS becomes involved in a case when someone reports allegations of maltreatment. Although APS programs receive reports of maltreatment in various ways, including in-person and online, most reports are made by phone to a hotline number. Depending on the state organization and structure, APS programs use statewide (centralized), local (decentralized), or combination approaches to staffing hotlines. Some hotlines are dedicated solely to APS and are staffed by APS professionals, while others might also handle reports for child protective or aging services. A centralized intake model has consistently been used by the majority of states since they began reporting this information to NAMRS. As shown in Exhibit 1.4, more than three-quarters of states use a centralized or combined hotline model, while less than 20% of states receive intakes at the local level only.

**Exhibit 1.4: APS Intake Models** 



Note: Based on information from 56 states. "Other" is reported as intakes taken by local law enforcement or through the completion and submission of an intake form.

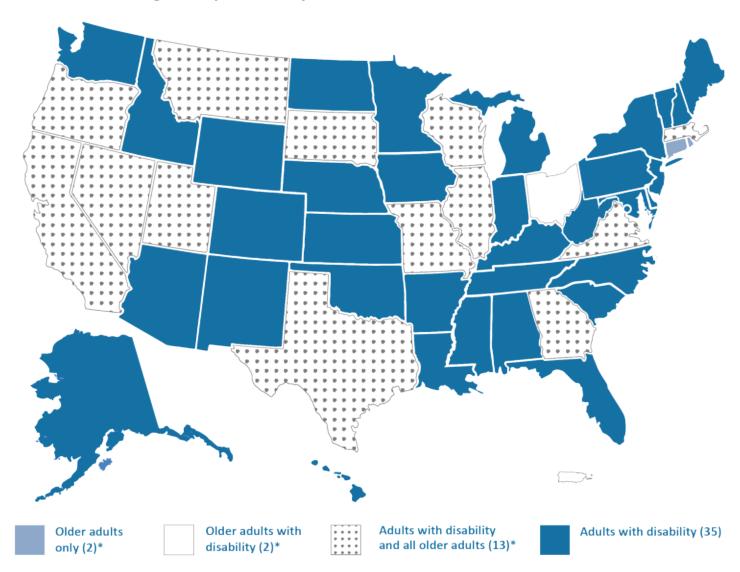
Hotline workers are aware that the person reporting the allegations (reporter) may not have extensive details about the situation or individuals involved. The agency needs to gather, at a minimum, enough information to determine whether the report meets the criteria for an investigation. To assist the agency in making this decision, the reporter will be asked to provide as much information as possible about all of the following:

- Alleged victim
- Alleged perpetrator
- Type(s) of alleged maltreatment
- Where the maltreatment occurred (setting)

Alleged Victim. APS programs use age and the concept of disability (also referred to by states as "dependency" or "vulnerability") to define the populations they serve. In 15 states, older adults (age 60+ or 65+) are eligible for APS services regardless of disability status; in the remaining states, program eligibility is based on a combination of age and disability. All states serving younger adults (age 18-59 or 18-64) require disability as an eligibility criterion for that population. Exhibit 1.5 provides a national picture of the population APS serves.

Alleged Perpetrator. Some agencies only investigate allegations where the alleged perpetrator is a non-professional or person in a trusted or ongoing relationship. This means that those APS programs do not investigate certain types of phone scams or financial exploitation resulting from a fraudulent business transaction, which are typically investigated by law enforcement or other government agencies. Information on the relationship between the alleged victim and the perpetrator is also helpful in determining the perpetrator's ongoing access to the alleged victim.

**Exhibit 1.5: APS Eligible Populations by State** 



<sup>\*</sup>Older adult is age 60+ or 65+ depending on the state.

Maltreatment Type. APS programs investigate a variety of maltreatment types, and the states' definitions of maltreatment vary. For NAMRS submissions, states match their definitions to the maltreatment categories listed in Exhibit 1.6. All states (100%) investigate neglect, and nearly all states (more than 90%) investigate physical abuse, self-neglect and sexual abuse. Most states (more than 80%) also investigate financial exploitation,

and emotional abuse. While some states investigate allegations of exploitation (non-specific), abandonment and other exploitation, only a small percentage of states (16.1%) investigate suspicious death. Almost half (46.4%) of APS programs investigate a type of maltreatment that is specifically defined in their state and does not match any of the categories listed in NAMRS. Those maltreatment types are captured under the "Other" category.

**Exhibit 1.6: NAMRS Maltreatment Type Definitions** 

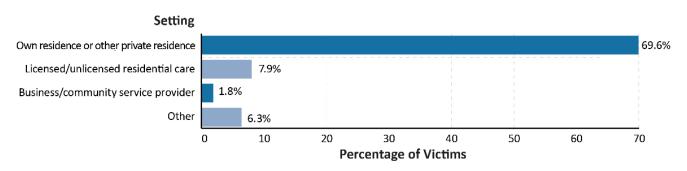
Maltreatment Types	Definitions	Percentage of States Investigating the Maltreatment Type	
Neglect	The failure of a caregiver or fiduciary to provide the goods or services necessary to maintain the health or safety of a person. Includes acts of omission and of commission (including willful deprivation, etc.).	100.0%	
Physical Abuse	The use of force or violence resulting in bodily injury, physical pain, or impairment. Excludes sexual abuse.	98.2%	
Self-Neglect	A person's inability, due to physical or mental impairment or diminished capacity, to perform essential self-care tasks including obtaining essential food, clothing, shelter, and medical care; obtaining goods and services necessary to maintain physical health, mental health, or general safety; hoarding; or managing one's own financial affairs.	94.6%	
Sexual Abuse	Nonconsensual sexual contact of any kind, including sexual contact with any person incapable of giving consent.	92.9%	
Financial Exploitation	The illegal or improper use of an individual's funds, property, or assets for another person's profit or advantage.	89.3%	
<b>Emotional Abuse</b>	The infliction of anguish, pain, or distress through verbal or nonverbal acts; this includes but is not limited to verbal assaults, insults, threats, intimidation, humiliation, and harassment.	82.1%	
Exploitation (non-specific)	The illegal or improper use of an individual or of an individual's funds, property, or assets for another's profit or advantage.	50.0%	
Other	A type of maltreatment not included in the categorizations provided.	46.4%	
Other Exploitation	The illegal or improper use of an individual for another person's profit or advantage, including exploitation of person, servitude, etc.	44.6%	
Abandonment	The desertion of a person by an individual who has assumed responsibility for providing care for that person, or by an individual with physical custody of another person.	37.5%	
Suspicious Death	An unexpected fatality or one in which circumstances or cause are medically or legally unexplained.	16.1%	

Note: Based on information from 56 states as reported in the Agency File.

Maltreatment Setting. The living settings where APS has the authority to investigate allegations of maltreatment varies from state to state. In every state, APS investigates reports involving individuals living in the community in their own or another private residence. States' responses to a practice survey APS TARC conducted in 2021 indicated that APS also investigates allegations of maltreatment in at least one type of residential care facility in 38 states.<sup>1</sup> Of those, some states investigate allegations involving the facility as well as its staff, while others are only authorized to investigate allegations involving family members, excluding incidents that are related to the facility operations or staff.

Exhibit 1.7 illustrates that the overwhelming majority (69.6%) of APS investigations involve adults who reside in their own homes or another private residence in the community. In states where investigation of alleged adult maltreatment in residential care facilities does not fall under APS jurisdiction, regulatory or licensing agencies conduct the investigations.

Exhibit 1.7: Victims by Setting of Reported Maltreatment Type



Note: Based on victim data submitted by 22 states for 68,446 victims. Unknown was listed as the setting for 14.4% of the victims.

<sup>1</sup> As a component of the National APS Evaluation project, the APS TARC evaluation team developed and implemented an online survey (the APS Practice Survey) to collect data on the details of APS practice from APS program administrators in each state. Publication of the evaluation report is pending.

#### Referrals

APS agencies use a screening or intake process to determine whether the report should be accepted or "screened in" for investigation. As shown in Exhibit 2.1, APS received more than 1.3 million reports of alleged adult maltreatment and accepted 59.1% (796,794) for investigation in FFY 2021. In making the screening decision, intake staff must consider whether the adult meets the population, setting, and jurisdiction eligibility criteria as explained in Chapter 1. Some APS programs also allow for "discretionary" screen outs based on their policy. If the report does not meet these criteria, APS may refer the case to a more appropriate agency (e.g., a regulatory/licensing program, law enforcement, other social service program) or may provide information to the reporter, which can then be used to assist the adult.

**Exhibit 2.1: Total Reports** 



Note: Based on data from 51 states that provided the number of reports screened in andscreened out.

Anyone may make a report to APS; however, many state APS statutes identify individuals who are mandated, or required, to report allegations of suspected maltreatment. There are 14 states with universal reporting laws, meaning everyone is a mandated reporter. Other states only mandate specific categories of professionals. Exhibit 2.2 illustrates that almost 60% of the reports investigated in FFY 2021 were reported by professionals and close to 16% were reported by relatives. This is consistent with the percentages reported in previous years, including FFY 2020 when there was a decrease in the percentage of reports from professionals during the early stage of the COVID-19 pandemic before reporting trends returned to historical levels.

**Exhibit 2.2: Investigations by Report Source** 



Note: Based on data from 31 states for 441,460 investigations. The source was Unknown or unidentified in 22,060 investigations. Investigations may have more than one report source.

### **Investigations by APS**

An APS report may involve more than one client and more than one allegation of maltreatment. The APS program investigates each allegation for each client in a screened in report. In FFY 2021, APS programs completed 779,879 investigations involving 786,600 clients. The number of clients is higher than the number of completed investigations because, as previously noted, more than one person may be the subject of a single investigation.

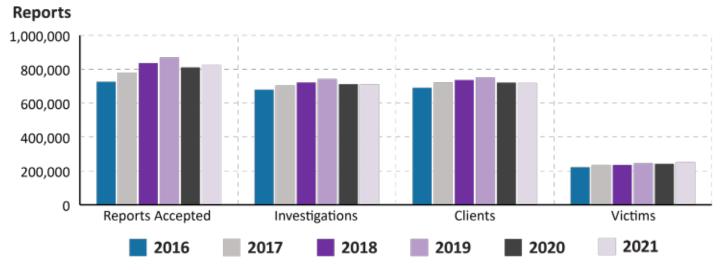
Investigations of APS reports include an assessment of the client's potential service needs as well as a finding, or disposition, on the validity of the allegation(s). Over 80% of states (81.8%) use a common tool throughout the state to assess client needs. APS may also interview others who might be aware of the situational details, such as family, friends, and service providers. The client's privacy is paramount, and APS uses discretion in contacting collateral sources, doing so only when necessary to assure the client's safety, determine a finding on the allegations, or coordinate client services.

81.8% of states use a common tool throughout the state to assess client needs.

If an allegation is found to be valid based on state law and policy, the allegation is considered "substantiated." In NAMRS, a client with one or more substantiated allegations is identified as a victim. Of the 786,600 clients who received an investigation in FFY 2021, 268,902 (34.2%) were determined to be victims. A report does not need to be substantiated for APS programs in most states to assist the client with finding services or resources to address unmet needs identified during the assessment.

Exhibit 2.3 shows the numbers of accepted reports, investigations, clients, and victims over the six years of NAMRS data collection. The number of investigations is lower than the number of accepted reports each year because not every investigation can be completed. This occurs for a variety of reasons, which are discussed under Reasons for Case Closure later in this report. As illustrated in the exhibit, the numbers reported for each data element have consistently increased every year prior to FFY 2020, when there was a decrease across all elements. While the numbers of accepted reports and victims increased in FFY 2021 (+1.8% for accepted reports and +4.2% for victims), the numbers of completed investigations and clients both decreased by less than half a percentage point (-0.1% for investigations and -0.4% for clients).

Exhibit 2.3: Year-to-Year Summary Data



Note: Based on states that submitted these data elements for each of the six years listed as follows: 49 states for Reports Accepted; 44 states for Clients; 44 states for Investigations; and 43 states for Victims.

### **Investigation Findings**

States submitting Case Component data provide detailed data on the disposition categories used by their APS programs. The NAMRS disposition categories are substantiated, unsubstantiated, inconclusive, or other. As with maltreatment types, states match or map their finding definitions to the equivalent NAMRS disposition categories. Exhibit 2.4 provides definitions of each type of finding and the percentage of allegations with each type of finding.

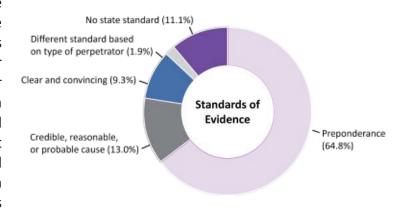
**Exhibit 2.4: Disposition Rates Across All Maltreatment Types** 

Definition	Percentage of Allegations with Dispos Type
The finding that the allegation of maltreatment is not supported under state law and policy.	48.7%
The finding that the allegation of maltreatment is supported under state law and policy.	28.7%
Disposition not included in categorizations provided. Includes inappropriate allegations that were investigated.	13.3%
The finding that there is insufficient information to either support or not support the allegation of maltreatment, but there is a reason to suspect maltreatment.	9.4%
	The finding that the allegation of maltreatment is not supported under state law and policy.  The finding that the allegation of maltreatment is supported under state law and policy.  Disposition not included in categorizations provided. Includes inappropriate allegations that were investigated.  The finding that there is insufficient information to either support or not support the allegation of maltreatment, but

Note: Based on data from 36 Case Component states for 628,977 allegations. One populous state does not use the "Substantiated" finding and accounts for 55.5% of the reports included under the disposition of "Other."

State statute and regulation define the standard of evidence the APS program uses to substantiate allegations of maltreatment. It is important to note that the standard of evidence definitions APS uses may not correspond with how the term is used or defined in their state's criminal justice system or other protective services programs. Most APS programs use a "preponderance of evidence" standard, usually defined as the greater weight of the evidence, as shown in Exhibit 2.5. Six states (11.1%) do not have a defined standard and one state uses a different standard depending on the type of perpetrator involved. Other standards states use include "credible, reasonable, or probable cause" and "clear and convincing."

**Exhibit 2.5: Standards of Evidence** 



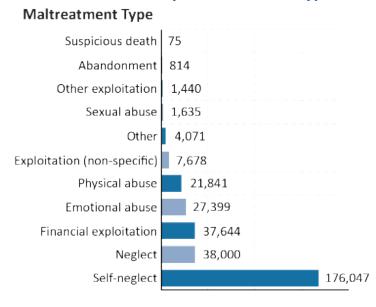
Note: Based on data from 54 states.

### **Maltreatment Types**

APS programs have a dual nature: they investigate various types of abuse by alleged perpetrators, and almost all programs (94.6%) also investigate self-neglect, an allegation type for which some states do not name anyone as an alleged perpetrator. Neglect and self-neglect are both investigated and substantiated more frequently that other types of maltreatment. Consistent with previous years, the number of self-neglect victims in FFY 2021 was higher than all other maltreatment types combined (see Exhibit 2.6).

Report dispositions vary significantly across the different maltreatment types. As shown in Exhibit 2.7, self-neglect is the only maltreatment category where the percentage of substantiated allegations is higher than the percentage of unsubstantiated allegations. Allegations of all abuse types and financial and other exploitation have much higher percentages of inconclusive reports than allegations of neglect and self-neglect. This illustrates the unique and difficult nature of these types of investigations.

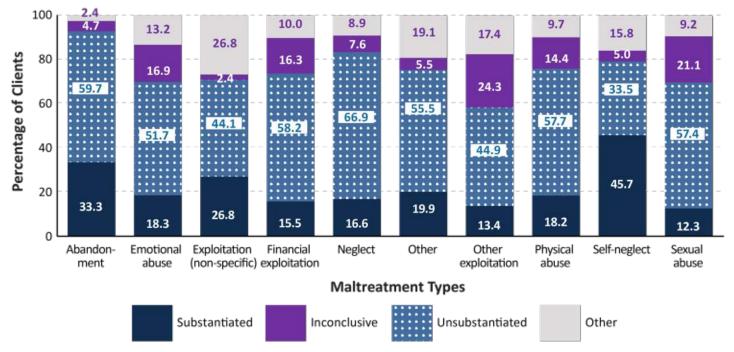
**Exhibit 2.6: Victims by Maltreatment Type** 



Note: Based on data from 52 states for 268,902 victims. Victims may have more than one substantiated maltreatment in a single investigation.

Number of Victims

Exhibit 2.7: Allegations by Disposition and Maltreatment Type



Note: Based on data from 36 states for 628,976 allegations.

#### An APS Case: Initiation to Case Closure

#### **Length of APS Involvement**

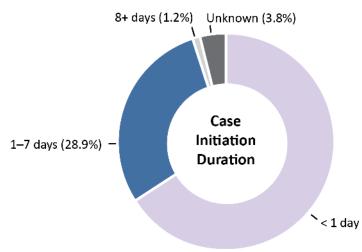
APS cases consist of the investigation and, in most states, the provision of protective services to address the safety, health, or well-being needs identified during the assessment. Services may be arranged or provided during the investigation, or the case may remain open with the APS agency for post-investigative services. Victims of self-neglect receive services more often than victims of any other type of maltreatment (see Appendix Exhibit A.1).

The timeframes for initiating and completing APS investigations are established in state statute, regulations, and/or policies, and this information is reported to NAMRS. The actual length of time an APS case is open, which may extend beyond the completion of an investigation, is dependent on multiple factors. These can include: the allegation type; participation of the client, perpetrator, or others involved; the ability to collect information or evidence; whether the APS agency provides post-investigative services; and the availability of services in the community.

Per state policies, the length of time for completing an investigation ranges from 20 days (two states) to 180 days (one state) with an average of 50.8 days across all states. NAMRS data indicates that the actual length of time for completing an investigation averages 51.1 days. This longer average of actual days could be because many states with longer investigation times per policy also report higher numbers of investigations. Exhibits 2.8, 2.9, and 2.10 provide data on the timeframes associated with an APS case.

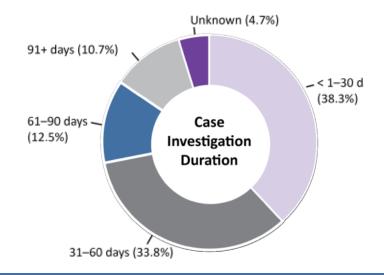
**Investigation Initiation:** Length of time from receipt of the report until the start of the investigation. About two-thirds (66.1%) of APS investigations are initiated within one day, and 95% of investigations are initiated within seven days.

Exhibit 2.8: Time to Initiation\*



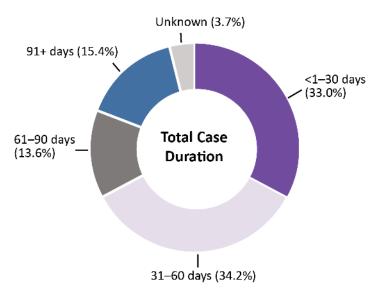
**Investigation Duration:** Length of time from the start of the investigation to determining the finding (disposition). The investigation duration for 72.1% of APS cases is between one and 60 days, with 38.3% of investigations completed within 30 days.

Exhibit 2.9: Investigation Duration\*



**Total Case Duration:** Length of time from the start of the investigation until the case is closed (includes the provision of services). The largest percentage of cases are open between 31 and 60 days.

#### **Exhibit 2.10: Total Case Duration**



\*Note: For Time to Initiation, 35 states submitted data for 478,395 investigations; for Investigation Duration, 31 states submitted data for 409,737 investigations; and for Total Case Duration, 31 states submitted data for 478,395 investigations.

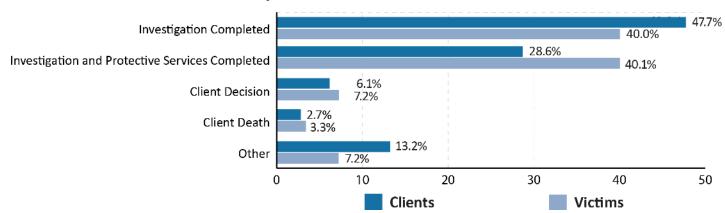
#### **Case Closure Reasons**

APS cases close for a variety of reasons. Respecting the rights of the client, including the right to self-determination, is a foundational principle of APS practice. APS clients and victims have the right to decline services unless a court determines they are unable to make sound decisions about their own health and safety. In some states, the case may be closed if the client or victim refuses to accept services or allow an investigation to be completed. The death of a client, particularly in cases where there is no perpetrator (e.g., a self-neglect case) or the perpetrator was unknown, may also result in a case being closed.

Exhibit 2.11 illustrates that a higher percentage of client cases (47.7%) were closed after completion of the investigation. A higher percentage of victim cases (40.1%), i.e., cases with at least one substantiated allegation, were closed after an investigation and the provision of protective services.

In looking at case closure reasons by maltreatment type, more self-neglect cases (47.5%) are closed after provision of services while most cases categorized as Other (71.8%) are closed after investigation (see Appendix Exhibit B.1).

**Exhibit 2.11: Clients and Victims by Case Closure Reason** 



Note: Client data is based on data submitted by 48 states for 728,028 clients. Victim data is based on data submitted by 31 states for 151,108 victims. The case closure reason was Unknown for 1.8% of clients and 2.3% of victims.

#### Age of APS Clients and Victims

APS programs define their eligible populations by age and disability. As illustrated in Exhibit 1.5, APS programs in all 56 states serve older adults (age 60+ or 65+). Programs in 53 states serve younger adults (18+) with disabilities as well. There are 15 programs where being an older adult is the sole criterion for APS program eligibility.

There are two key reasons why APS programs serve more older adults than younger adults:

- Programs serving younger adults include disability or vulnerability in their eligible population definition, which reduces the size of the young adult population eligible for APS.
- Known risk factors for adult maltreatment, such as social isolation and declining health or cognitive status, are present more in older adult populations than younger.

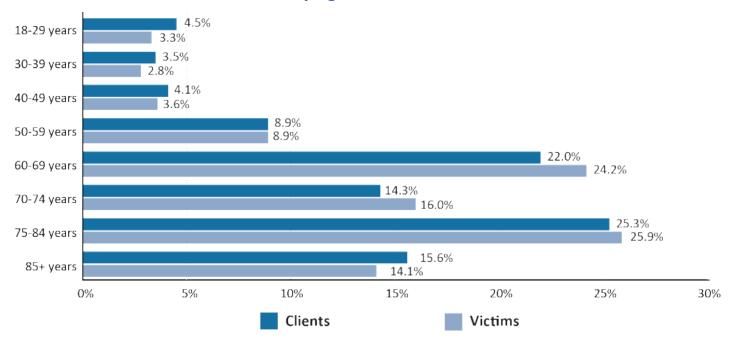
The age distribution for APS clients and victims as reported to NAMRS shows that over 75% are 60 or older. The data highlighted in Exhibit 3.1 also shows that



just 8% of clients and just over 6% (6.1%) of victims are under age 40.

Overall, the highest percentage of both clients and victims are between 75 and 84 years old. However, when looking at specific maltreatment types, there are multiple categories where the highest percentage of victims falls in different age ranges. There are four maltreatment types where the highest percentage of victims are age 60-69: abandonment, emotional abuse, physical abuse, and self-neglect. The highest percentage of sexual abuse victims are between 18 and 29 years of age (see Appendix Exhibit B.2).

**Exhibit 3.1: APS Clients and Victims by Age** 



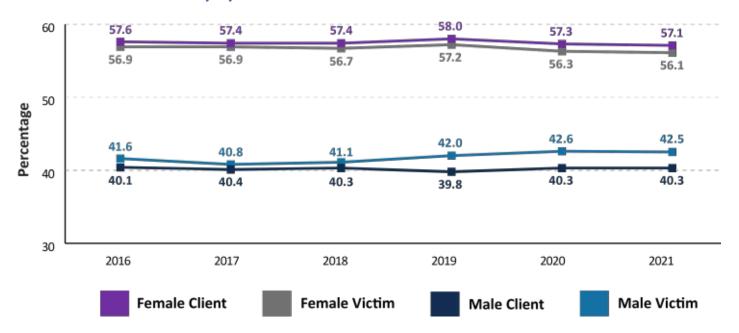
Note: Based on 36 states submitting data for 494,219 clients, and 50 states submitting data for 247,922 victims, age was Unknown for 1.8% of clients and 1.3% of victims.

### Gender, Race and Ethnicity of APS Clients and Victims

Exhibit 3.2 shows two notable trends for gender data that have been consistent across the entire course of NAMRS data collection (2016-2021). The first trend is that women have represented more than half of the individuals served by APS each year. Another, perhaps surprising, trend shown by the data is that the percentage of female victims is lower than the percentage of female clients every year, while the opposite is true for men. In looking at FFY 2021 only, gender data was submitted by 36 states for 494,219 clients and by 51 states for 258,774 victims. Although very few states collect information on transgender

individuals, 0.04% of clients and 0.5% of maltreatment victims are identified as transgender in the NAMRS data. Women were 57.6% of the clients and 56.4% of the victims, and men were 40.2% of the clients and 42.0% of the victims. Gender was reported as Unknown for 2.1% of clients and 1.5% of victims. When looking at gender differences by maltreatment types (see Appendix Exhibit B.3), the smallest difference in victim gender is for abandonment (50.7% for women and 48.8% for men) and the largest difference is for sexual abuse (80.7% for women and 17.2% for men).

**Exhibit 3.2: Gender Identity by Year** 

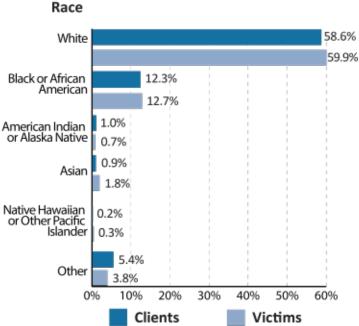


Note: Based on 25 states submitting gender data for clients 34 states that submitted gender data for victims each of the six years. Only data for male and female gender is shown due to the small percentage of transgender clients and victims reported each year. There is also a small percentage of clients and victims for whom gender is Unknown each year.

APS programs do not report race and ethnicity data as consistently as gender. For that reason, the percentages in Exhibits 3.3 and 3.4 may not be representative of all clients and victims. Although there are no notable differences between victims and clients within identified racial categories, Exhibit 3.4 shows that substantiation rates are higher for Hispanic individuals than for non-Hispanic individuals.

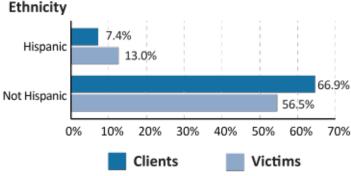


**Exhibit 3.3: Clients and Victims by Race** 



Note: Based on 35 states submitting data for 493,713 clients and 49 states submitting data for 247,890 victims, race was listed as Unknown for 22.3% of clients and 21.6% of victims.

**Exhibit 3.4: Clients and Victims by Ethnicity** 



Note: Based on 30 states submitting data for 444,480 clients and 44 states submitting data for 246,644 victims, ethnicity was listed as Unknown for 25.7% of clients and 30.5% of victims.

#### **Disabilities Impacting APS Clients and Victims**

While a person's disability status may be an important factor during intake when the screener is determining whether the individual meets the APS eligibility criteria, it may also be a critical consideration in addressing client needs. Functional limitations and disabilities, whether cognitive or physical, may impair a person's ability to provide for their own care or protection, and impair their ability to live independently. Understanding the impact of disabilities on a client or victim is important to developing a plan to meet their service needs.

For the states reporting disability information, 7.0% of clients were assessed to have no disability, while 4.4% of victims were assessed to have none. The most frequent type of disability for victims of adult maltreatment, as shown in Exhibit 3.5, is ambulatory difficulties, and the most frequent disability types for APS clients are cognitive impairment and difficulties with independent living activities.

**Exhibit 3.5: APS Clients and Victims by Disability Type** 

Disability	Definition	% of Clients	% of Victims
Ambulatory Difficulty	Having serious difficulty walking or climbing stairs.	25.6%	31.9%
Cognitive Difficulty	Because of a physical, mental, or emotional problem, having difficulty remembering, concentrating, or making decisions.	26.0%	20.8%
Communication Difficulty	Because of a physical, mental, or emotional problem, having difficulty with speech or language.	5.5%	5.2%
Hearing Difficulty	Deaf or having serious difficulty hearing.	3.7%	3.9%
Independent Living Difficulty	Because of a physical, mental, or emotional problem, having difficulty doing errands alone such as visiting a doctor's office or shopping.	26.0%	19.4%
Self-Care Difficulty	Having difficulty bathing or dressing.	20.3%	18.3%
Vision Difficulty	Blind or having serious difficulty seeing, even when wearing glasses.	3.5%	4.2%
Other	Disabilities other than those specified in the categories provided.	14.9%	9.8%
None	Assessed, and no disability determined.	7.0%	4.4%

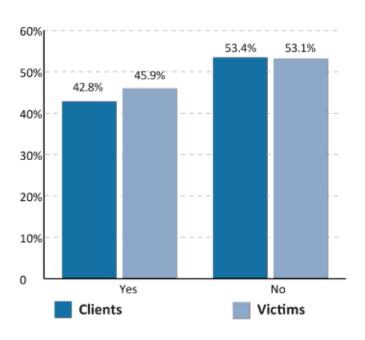
Note: Based on 22 states submitting data for 113,696 victims and 23 states submitting data for 319,011 clients, disability type was listed as Unknown for 39.9% of victims and 34.9% of clients. Multiple disabilities may be recorded for a single client or victim.

### **APS Clients and Victims with Prior Reports**

There are several reasons why clients and victims may have been the subject of a previous APS report. Although APS interventions address emergency needs and are intended to mitigate the root causes of the maltreatment, other factors contribute to maltreatment recurring, including known risk factors for the population, the lack of available or accessible services, and the client's right to decline intervention. Maltreatment victims are also at ongoing risk due to potential changes in their financial, mental, or physical conditions; informal or formal support systems; and/ or living situations.

A higher percentage of victims (45.9%) than clients (42.8%) had previous reports of maltreatment in the states that submitted this information (see Exhibit 3.5). Victims of abandonment were the subject of a previous report at a higher rate (60.7%) than victims of other types of maltreatment (see Appendix Exhibit B.7).

**Exhibit 3.6: Victims by Living Arrangement at Start and Close of APS Case** 



Note: Based on 23 states submitting data for 135,300 victims and 24 states submitting data for 405,314 clients, this information was Unknown for 1.0% of victims and 3.8% of clients.

#### **Residence of Adult Maltreatment Victims**

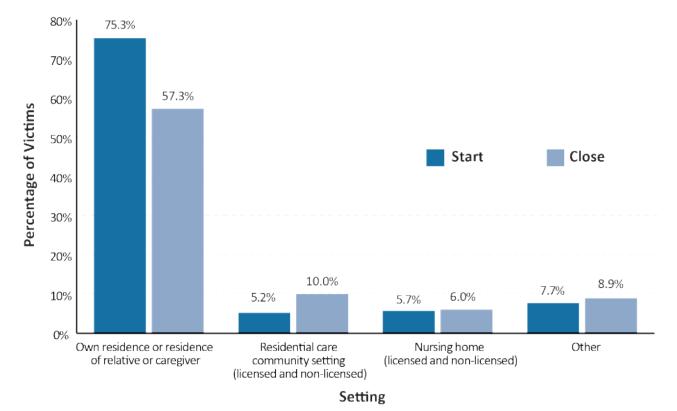
One concern commonly expressed about APS intervention is that victims will be inappropriately placed in residential care facilities as a result of the APS investigation. Changes in a victim's living setting may be the result of maltreatment, but it could also be the result of other changes in the adult's life circumstances.

Only a small number of states submit data on the residence of victims at **both** the start and close of an APS case, and for that reason the percentage presented in Exhibit 3.7 may not be representative for all victims. Exhibit 3.7 provides the data for the 52,352 maltreatment victims with a known value for both Living Setting at Start and Living Setting at Close. While 75.3% of victims are living in their own residence or the residence of a relative or caregiver at the beginning of

their APS cases, 57.3% of victims are living in their own residence or the residence of a relative or caregiver at the end of those APS cases.



**Exhibit 3.7: Victim Living Setting at Start and Close of the Investigation** 



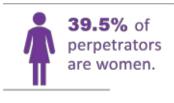
Note: Based on 14 states submitting data for 52,352 victims, living arraignment was Unknown or left blank for 6.2% of victims at case start and 17.7% of victims at case closure.

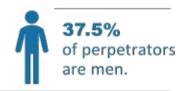
### **Chapter 4: Perpetrators**

#### **Perpetrators of Adult Maltreatment**

APS programs do not systematically collect detailed demographic information on perpetrators to the same degree as they do for clients and victims. Less than half of states submit the perpetrator data elements to NAMRS. Although some states will name the victim in a self-neglect case as a perpetrator or "self-perpetrator," the NAMRS data reported here excludes self-perpetrators. The perpetrator data that has been reported to NAMRS provides the following insights:

- For cases where the perpetrator age was known, the largest percentage of perpetrators were between ages 50-59 (10.5%) and 40-49 (9.6%) as illustrated in Exhibit 4.1.
- Gender data was submitted for 48,695 perpetrators and was listed as Unknown for 23.0% of them. For the 33 states reporting perpetrator gender, women (39.5%) were overall slightly more likely than men (37.5%) to be listed as the perpetrator. Perpetrator

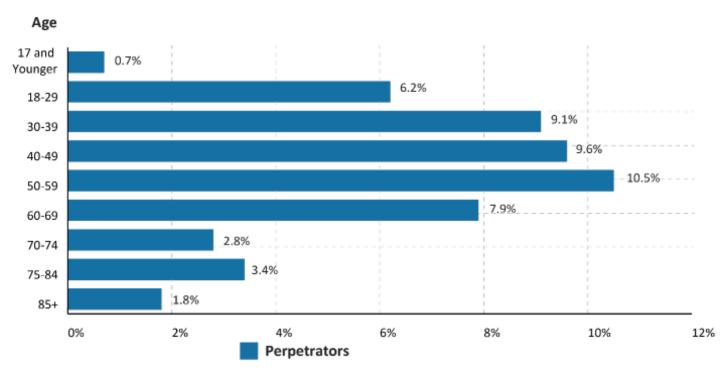




gender by maltreatment types revealed some variations: men are identified as perpetrators at a higher percentage in cases of abuse (physical, sexual, and emotional), and women are more often the perpetrators in cases of abandonment, neglect, and exploitation as well as the state-defined maltreatment types (see Appendix Exhibit B.9 for complete data).

 For the 31 states reporting victim-perpetrator relationship data, 23.0% of the 44,827 perpetrators had no familial relationship to the victim (see Appendix Exhibit B.10).

**Exhibit 4.1: Perpetrators by Age** 



Note: Based on data submitted by 29 states for 40,699 perpetrators. The age was listed as Unknown for 48.0% of the perpetrators.

#### Introduction

As we did last year, APS TARC reviewed the trends in NAMRS data to assess what impact COVID-19 may have had on APS programs, as reported to NAMRS. Since we do not have data identifying clients with COVID-19, the analysis relies on looking at trends in the data and associating them with certain time periods during the pandemic. While certain patterns may be detectable in the data, it is not possible to establish that the patterns are attributable solely or in part to COVID-19. For this year's analysis, we increased the number of data elements included and expanded the timeframe we were able to review from a few months to a year and half.

The nearby box summarizes our findings from review of the data last year. Review of additional months of data confirms the conclusions from last year and points out some longer-term trends that may have started around the time of the pandemic.

#### **Literature Review**

For context, we also conducted a brief literature review. Since last year, a study was published that indicated an increase in reports of "elder abuse" (excludes selfneglect) due to COVID-19. Such an increase, however, is not consistent with reports to APS as reflected in NAMRS data. In an article titled "High Prevalence of Elder Abuse During the COVID-19 Pandemic: Risk and Resilience Factors," the researchers found that one in five older persons in the study sample (n = 191; 21.3%) reported elder abuse, an increase of 83.6% from prevalence estimates before the pandemic based on a small cohort of older adults who were sheltering at home and responded to a survey about whether they had experienced abuse. (Physical abuse increased by 23.8%, financial abuse by 114%, and verbal abuse was the same.) The authors cite existing studies that have shown that interpersonal violence tends to increase and intensify during times of unrest, including during economic downfalls and natural catastrophes. They also found that individuals who adhered to physical distancing practicing behaviors were less likely to experience abuse.



#### 2020 Report Covid-19 Impact Summary

- **3.** The number of reports to APS in FFY 2021 remained about the same as in FFY 2020 and reports accepted decreased slightly.
- 4. For FFY 2021 overall, the total number of investigations decreased slightly. The number of investigations decreased in the early stage of the pandemic. Of particular note was a decrease in the percentage of reports from professionals.
- 5. While there are some changes in the data for case closure reason and durations, it is hard to separate the changes in the data during the pandemic from the longer-term trends and individual state changes.
- **6.** The percentage of self-neglect cases increased during the early months of the pandemic.
- 7. There was also a short-term increase in substantiation rates during the early months of the pandemic, potentially associated with the increased percentage of self-neglect cases.
- **8.** There was no change in the demographic characteristics of APS clients during the early months of the pandemic.

In an "Opinion" article published in Frontiers of Public Health, an APS researcher and the executive director of the National Adult Protective Services Association (NAPSA) made two broad points about the impact of the pandemic, both of which are consistent with feedback APS TARC received during two conference workshops (NAPSA and Texas APS conferences) last year on the impact of COVID-19 on APS programs.

First, citing feedback from APS administrators during weekly conference calls, the APS programs experienced the "Who You Gonna Call?" phenomenon of "APS often becomes the default agency for the aging and disability systems," especially for cases involving homelessness and mental illness. That is, APS staff become de facto frontline staff even though they are not technically front line in many communities.

Second, they noted many states made changes in policies regarding face-to-face visits with clients and other parties with notable differences across APS programs. Feedback from APS TARC-conducted workshops indicated this change created opportunities for improved practice and policy for initiating cases. Beyond face-to-face visits, many APS programs decided to increase virtual or remote investigations, although anecdotal feedback indicates this was a temporary response to safety concerns for both workers and clients.

The authors go on to cite the need for "... a study that compares substantiation rates and outcomes before, during, and after the pandemic can inform our understanding of virtual or remote investigation." Our review of NAMRS data examines substantiation rate but not outcomes.

#### **Review of NAMRS Data**

#### Methodology

The basic methodology for analysis of NAMRS data was the same as last year. We sought to identify potential COVID-19 impacts by comparing FFY 2019, FFY 2020, and first through third quarters of FFY 2021 data.<sup>2</sup> We compared data month by month to identify any seasonality in the data trends and examined the overall trend. Only states that submitted data all three years were included in the analysis. The team examined the following NAMRS data elements:

- Number of reports screened in and screened out
- Report source
- Number of substantiated investigations
- Case initiation duration
- Investigation and case duration
- · Case closure reason
- Demographic information of victims
- Maltreatment type
- Demographics information of perpetrators
- Relationship of perpetrators and victims
- Services for clients and victims

<sup>2</sup> States submit NAMRS data on cases closed during the federal fiscal year. For analysis, cases were assigned to a month based on report date. Cases opened the last few months of the year that have not closed are not included in the NAMRS data submitted by the states. Because cases opened during the later months (July – September) of 2021 are more likely to not be closed before end of September (the end of the reporting period), we excluded those months from our analysis.

#### Impact on Reports and Investigations

Exhibit 5.1 provides data on the number of reports accepted or not accepted at intake and on the total number of investigations. (Data on reports is not available on a monthly basis.) The number of reports accepted and the number of investigations have both decreased over the three years (primarily driven by two states), reversing the trend of increases. The percentage of reports not accepted increased 4% in FFY 2020 but remained at the same level in FFY 2021. Except for the drop in investigations during the initial shutdown months of the pandemic, the number of APS investigations per month has remained very stable, following usual seasonal patterns (see Exhibit 5.2).

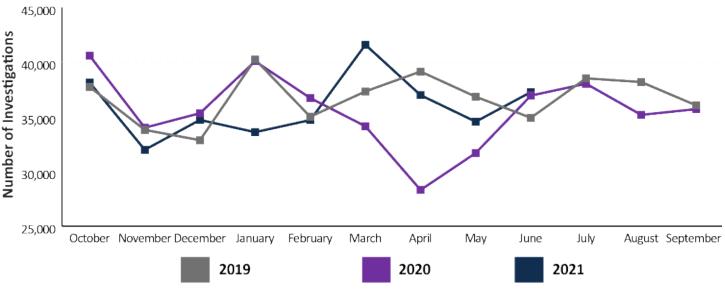


Exhibit 5.1: Comparison of Reports and Investigations Between Federal Fiscal Years Investigations Between FFY 2019 and FFY 2020

FFY Year	Category	Number of Reports	Change Previous Year	Percentage of Reports	Change Previous Year	Number of Investigations	Change Previous Year
	Accepted	820,000		62.3%			
2019	Not Accepted	495,992		37.7%			
	Total	1,315,992				793,592	
	Accepted	773,053	(-46,947)	58.3%	(-4.0%)		
2020	Not Accepted	552,123	56,131	41.7%	4.0%		
	Total	1,325,176	9,184			767,119	(-26,104)
2021	Accepted	789,814	16,761	58.9%	0.6%		
	Not Accepted	550,195	(-1,928)	41.1%	(-0.6%)		
	Total	1,340,009	14,833			767,478	(-10)

Note: Based on reporting from 47 states for number of reports and 51 for number of investigations. States must have submitted all three FFYs to be included in exhibit.

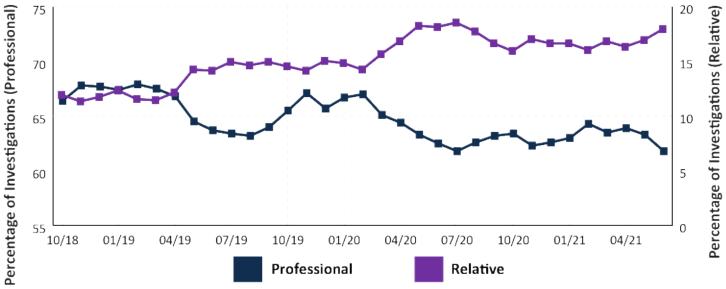
**Exhibit 5.2: Number of Investigations by Month** 



Note: Based on data submitted by the same 32 states. States must have submitted all three FFYs to be included in exhibit.

In last year's analysis, we noted that the number of reports from professionals dropped during the shutdown period, but this was a short-term decrease as the number of reports from professionals is back at historical levels, although as a percentage it has remained lower than it was pre-pandemic and the percentage of reports from relatives has increased (see Exhibit 5.3).

**Exhibit 5.3: Percentage of Reports by Professionals and Relatives by Month** 



Note: Based on data submitted by 27 states. States must have submitted all three FFYs to be included in exhibit. Unknown responses are excluded from all values to account for variation in states' reporting capabilities across FFYs.

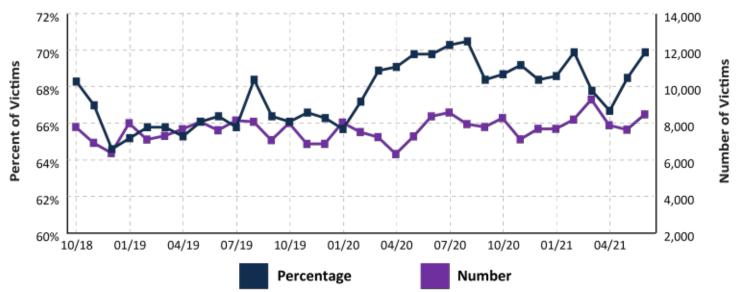
### Impact on the Nature of Investigations and Clients

#### **Types of Maltreatment**

In last year's analysis, we noted that the percentage of allegations for self-neglect increased during the shutdown months. Since then, as shown in Exhibit 5.4, the number of self-neglect victims is slightly higher and percentage of victims with self-neglect allegations is consistently higher.



Exhibit 5.4: Number and Percentage of Victims with Self-neglect Allegations by Month



Notes: Based on data submitted by 31 states. States must have submitted all three FFYs to be included in exhibit. Unknown responses are excluded from all values to account for variation in states' reporting capabilities across FFYs.

#### **Case Closure and Services**

Another notable trend in the data since the pandemic is an increase in the percentage of cases completed without providing services as shown in Exhibits 5.5, 5.6, and 5.7. In shutdown months, Investigations Completed and Client Death reasons increased slightly, and the remaining reasons went down slightly. (The biggest change was in Other.) The services data show an increase in percentage of clients (particularly) and victims receiving services in

the shutdown period, but this is not reflected in the case closure reason of Investigation and Protective Services Case Completed. However, there is a drop in clients and victims receiving services in last quarter FFY 2020, which is consistent with a notable drop in Investigation and Protective Services Case Completed percentage. There is not an apparent theory as to why COVID-19 would have caused these trends.

**Exhibit 5.5: Case Closure Reason: Percentage of Investigations Completed Without Service Case** 



Notes: Based on data submitted by 26 states. States must have submitted all three FFYs to be included in exhibit. Unknown responses are excluded from all values to account for variation in states' reporting capabilities across FFYs. One state was excluded due to program changes during the period.

**Exhibit 5.6: Case Closure Reason: Percentage of Investigations Completed with Service Case** 



Notes: Based on data submitted by 26 states. States must have submitted all three FFYs to be included in exhibit. Unknown responses are excluded from all values to account for variation in states' reporting capabilities across FFYs. One state was excluded due to program changes during the period.

**Exhibit 5.7: Percentage of Clients and Victims Receiving Services by Month** 



Notes: Based on data submitted by 18 states for victims and 19 for clients. States must have submitted all three FFYs to be included in exhibit. Unknown responses are excluded from all values to account for variation in states' reporting capabilities across FFYs. One state was excluded due to program changes during the period.

## **Chapter 5: Potential Impact of COVID-19**

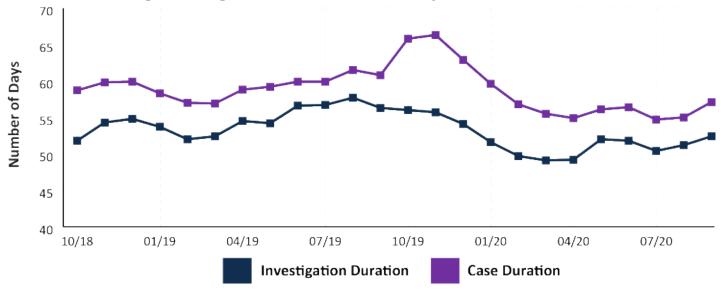
#### **Duration**

Last year's COVID-19 analysis found that "... the length of time to complete an investigation and the overall length of time a case is opened (durations) was shorter during April – June 2020 compared to April - June 2019. However, it is not clear if this decrease in durations was associated with COVID-19 since the decrease in durations started well before COVID-19 became a factor." A longer-term view of the data, shown in Exhibit 5.9, is consistent with last year's finding. There was a notable drop in durations in the early months of the pandemic, probably reflecting the closure of cases when workers were not able to conduct face-to-face visits and had time to process cases. This trend appears to be reversing, although it is too early to tell since we cannot show data for 2021, which becomes distorted since NAMRS is based on cases closed during the fiscal year.

#### **Perpetrator and Demographic Analysis**

We also examined data related to perpetrator and client demographics as well as dispositions. Like last year's analysis, there were not any notable changes or trends.





Notes: Based on data submitted by 27 states for investigations and 31 states for cases. States must have submitted all three FFYs to be included in exhibit.

## **Chapter 5: Potential Impact of COVID-19**

### **Summary**

The impact of COVID-19 on APS investigations, as reflected in NAMRS data, does not appear to be significant. There were clearly immediate short-term impacts—most notably on the number of investigations (decrease), reports by professionals (decrease), percentage of self-neglect cases (increase), cases with services (decrease), and in the percentages of victims receiving services (decrease, although data is somewhat contradictory). In the longer term, some of the immediate impacts became ongoing trends, and there are also other noticeable trends in the data that appear to have started with the pandemic. Specifically, since the start of the pandemic the following trends are notable:

- A decrease in reports from professionals
- An increase in the percentage of victims with an allegation of self-neglect
- A decrease in investigation and case durations, although they may be increasing again

It remains to be seen if these trends will continue, and while the timing would suggest the pandemic contributed to them, it is not possible to determine a direct impact.

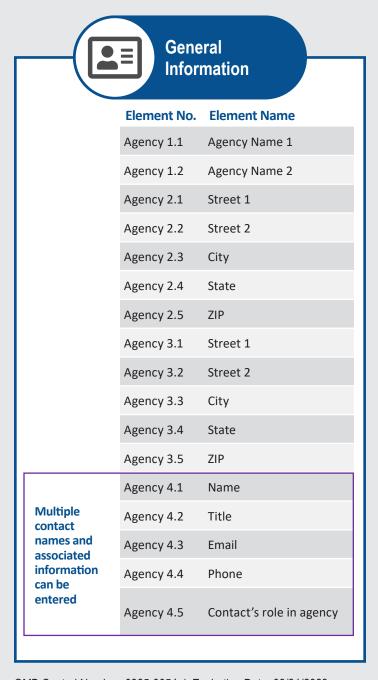
## **Chapter 5: Potential Impact of COVID-19**

### **Selected Bibliography**

- Chang, E.-S., Phil, M., & Levy, B. R. (2021). High Prevalence of Elder AbuseDuring the COVID-19 Pandemic:Risk and Resilience Factors. *The American Journal of Geriatric Psychiatry*, doi.org/10.1016/j.jagp.2021.01.007.
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- Makaroun, L. K., Bachrach, R. L., & Rosland, A.-M. (2020). Elder Abuse in the Time of COVID-19—Increased Risks for Older Adults and Their Caregivers. *American Journal of Geriatric Psychiatry*, doi: 10.1016/j. jagp.2020.05.017.
- Makaroun, L. K., Beach, S., Rosen, T., & Rosland, A.-M. (2020). Changes in Elder Abuse Risk Factors Reported by Caregivers of Older Adults during the COVID-19 Pandemic. *Journal of the American Geriatrics Society*, doi. org/10.1111/jgs.17009.
- Teaster, P. B., Roberto, K. A., Hoyt, E., Savla, J., Fua, I., & Kebede, B. (2020). Adult Protective Services Study on the Impact of COVID-19, Findings from State Administrator Survey and Interviews with Local APS Staff. Submitted to the Administration for Community Living, U.S. Department of Health and Human Services.

### **Agency Component**

Collects information on the policies and practices of each state adult protective services (APS) agency as context for understanding the Case Component or the Key Indicators Component submission.



	Agency Profile
Element No.	Element Name
Agency 5	Data sources
Agency 6	Population served
Agency 6.1	Population served: setting
Agency 7	Investigator FTEs filled
Agency 7.1	Supervisor FTEs filled
Agency 8	Intake
Agency 9	Reports accepted for investigation
Agency 9.1	Reports not accepted, or resolved through I&R/I&RA
Agency 10	Response time in hours
Agency 11	Investigation completion time in days
Agency 12	Types of maltreatment
Agency 13	Standard of evidence
Agency 14	Assessment tools
Agency 15	Service gaps
Agency 16	Perpetrators

OMB Control Number: 0985-0054 | Expiration Date: 03/31/2023

## **Key Indicators**

OMB Control Number: 0985-0054 Expiration Date: 03/31/2023

### Summary statistics on all cases in federal fiscal year on 20 data elements



### Investigations

1 Data Element

**Element Element Name/Description** No. Κ1 Investigations closed



#### **Clients**

3 Data Elements

	Element No.	Element Name/Description
	K 2	Clients who received an investigation
	К 3	Clients who received interagency coordination
	K 4.1	Investigation completed
	K 4.2	Investigation completed and protective services case completed
	K 4.3	Investigation unable to be completed (non-specific)
Clients by case closure reason	K 4.3.1	Investigation unable to be completed due to death of client during investigation
	K 4.3.2	Investigation unable to be completed due to refusal of client
	K 4.4	Protective services case opened but not completed (non-specific)
	K 4.4.1	Protective services case closed due to death of client
	K 4.4.2	Protective services case closed due to client decision to not continue
	K 4.5	Other
	K 4.6	Unknown



#### **Victims**

11 Data Elements

	Element No.	Element Name/ Description	
	K 5	Clients found to be victims	
	K 6.1	18-29 years	
	K 6.2	30-39 years	
<b>O</b>	K 6.3	40-49 years	
ctims by Age	K 6.4	50-59 years	
ns b	K 6.5	60-69 years	
/ictir	K 6.6	70-74 years	
>	K 6.7	75-84 years	
	K 6.8	85 and older	
	K 6.9	Unknown	
	K 7.1	American Indian or Alaska Native	
e	K 7.2	Asian	
/ Rac	K 7.3	Black or African American	
ictims by Race	K 7.4	Native Hawaiian or Other Pacific Islander	
Vic	K 7.5	White	
	K 7.6	Other	
	K 7.7	Unknown	
s by ity	K 8.1	Hispanic, Latino/a, or Spanish	
Victims Ethnic	K 8.2	Not Hispanic, Latino/a, or Spanish	
-	K 8.3	Unknown	
y ıtity	K 9.1	Male	
ms b Ider	K 9.2	Female	
Victi	K 9.3	Transgender	
Gel	K 9.4	Unknown	

		Element No.	Element Name/ Description
		K 10	Number of victims who received one or more benefits
		K 11	Number of victims with one or more disabilities
		K 12	Number of victims with one or more screened or diagnosed behavioral conditions
		K 13.1	Abandonment
		K 13.2	Emotional abuse
	эе	K 13.3	Exploitation (non-specific)
	nent Typ	K 13.3.1	Financial exploitation
	ictims by Maltreatment	K 13.3.2	Other exploitation
	Š	K 13.4	Neglect
	d st	K 13.5	Physical abuse
	ctin	K 13.6	Sexual abuse
	5	K 13.7	Suspicious death
		K 13.8	Self-neglect
		K 13.9	Other
		K 13.10	Unknown
		K 14	Victims with guardian or conservator at start of investigation
		K 15	Victims who received services or were referred for services by APS

## **Key Indicators (continued)**

OMB Control Number: 0985-0054 Expiration Date: 03/31/2023

Summary statistics on all cases in federal fiscal year on 20 data elements

	Element No.	Element Name/ Description
	K 16.1	17 and younger
	K 16.2	18-29 years
e.	K 16.3	30-39 years
Perpetrators by Age	K 16.4	40-49 years
ors b	K 16.5	50-59 years
trat	K 16.6	60-69 years
rpe	K 16.7	70-74 years
٦	K 16.8	75-84 years
	K 16.9	85 and older
	K 16.10	Unknown



	Element No.	Element Name/ Description
rs by	K 17.1	Male
ators    denti	K 17.2	Female
Perpetra Gender	K 17.3	Transgender
Per	K 17.4	Unknown

Element No.	Element Name/ Description
K 18	Perpetrators who had a kinship relationship to the victim
K 19	Perpetrators who had one or more associations to victim
K 20	Perpetrators for whom one or more legal remedies on behalf of the victim were recommended or sought

## **Case Component**

Case-level information on all cases in federal fiscal year on 54 data elements, including all Key Indicators data elements.



### **Investigations**

7 Data Elements

Element No.	<b>Element Name</b>	<b>Code Values</b>
Inv1	Investigation ID	N/A
Inv2	Report date	N/A
Inv3	Report source	15 code values
Inv4	State/county FIPS code of investigative agency	N/A

Element No.	<b>Element Name</b>	<b>Code Values</b>
Inv5	Investigation start date	N/A
Inv6	Investigation disposition date	N/A
Inv7	Case closure date	N/A



#### **Clients**

30 Data Elements

Element No.	<b>Element Name</b>	Code Values	Element No.	<b>Element Name</b>	Code Values
Clt1	Client ID	N/A	Clt17	Disabilities	9 code values
Clt2	Maltreatment setting	12 code values	Clt18	ADL score	N/A
Clt3	State/county FIPS code of	N/A	Clt19	IADL score	N/A
Clt4	client Case closure reason	9 code values	Clt20	Behavioral health screenings or diagnoses	10 code values
Clt5	Age	58 code values	Clt21	Living setting at start	8 code values
Clt6	Gender identity	3 code values	Clt22	Living setting at close	8 code values
Clt7	Sexual orientation	5 code values	Clt23	Substitute decision-makers	7 code values
Clt8	Race	17 code values	CILZS	at start	/ code values
Clt9	Ethnicity	6 code values	Clt24	Substitute decision-makers	7 code values
Clt10	Primary language	13 code values	CILZ4	at close	/ code values
Clt11	Marital status	7 code values	Clt25	Services at start	19 code values
Clt12	Schooling level	4 code values	Clt26	Services APS	19 code values
Clt13	Employment status	4 code values	Clt27	Services referred	19 code values
Clt14	Income level	5 code values	Clt28	Services at close	19 code values
Clt15	Benefits	9 code values	Clt29	Interagency coordination	7 code values
Clt16	Veteran status	2 code values	Clt30	Previous report	2 code values



### Maltreatment **Allegation**

2 Data Elements

Element No.	Element Name	<b>Code Values</b>
Mal1	Maltreatment type	11 code values
Mal2	Maltreatment disposition	4 code values

### **Case Component (Continued)**

Case-level information on all cases in federal fiscal year on 54 data elements, including all Key Indicators data elements.



#### **Perpetrator**

7 Data Elements

Element No.	<b>Element Name</b>	<b>Code Values</b>
Per1	Perpetrator ID	N/A
Per2	Age	58 code values
Per3	Gender identity	3 code values
Per4	Race	17 code values

Element No.	Element Name	<b>Code Values</b>
Per5	Ethnicity	6 code values
Per6	Disabilities	9 code values
Per7	Behavioral health screenings or diagnoses	10 code values

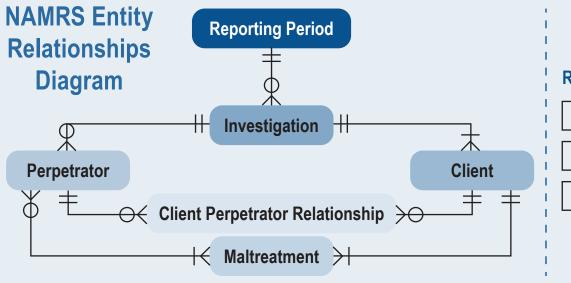


### **Client/Perpetrator** Relationship

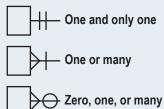
8 Data Elements

Element No.	<b>Element Name</b>	<b>Code Values</b>	Elemei
CPR1	Cohabitation at start	2 code values	CPR6
CPR2	Cohabitation at close	2 code values	
CPR3	Kinship relationship	10 code values	CPR7
CPR4	Perpetrator association at start	10 code values	CPR8
CPR5	Perpetrator association at close	10 code values	

Element No.	<b>Element Name</b>	<b>Code Values</b>
CPR6	Perpetrator substitute decision-maker at start	7 code values
CPR7	Perpetrator substitute decision-maker at close	7 code values
CPR8	Perpetrator legal remedy recommendation	6 code values



**Relationship Key** 



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The following exhibits provide expanded data tables for the information discussed in this report.

**Exhibit B.1: Victim Maltreatment by Case Closure Reason** 

Close Reason	Abandonment	Emotional abuse	Exploitation	Neglect	Other	Physical abuse	Self-neglect	Sexual abuse	All Victims
Investigation completed	47.8%	43.1%	55.7%	52.9%	71.8%	47.4%	32.1%	45.1%	40.0%
Investigation completed and protective services case completed	25.0%	30.4%	23.3%	28.3%	1.1%	32.9%	47.5%	32.2%	40.1%
Investigation unable to be completed (non-specific)	3.8%	0.7%	0.9%	0.5%	1.3%	0.4%	1.0%	0.6%	0.9%
Investigation unable to be completed due to death of client during investigation	1.9%	0.7%	0.8%	2.5%	1.4%	0.8%	2.8%	0.4%	2.2%
Investigation unable to be completed due to refusal of client	3.0%	6.8%	3.1%	1.9%	1.1%	4.9%	5.0%	5.1%	4.4%
Other	15.5%	8.9%	6.7%	7.0%	17.0%	6.2%	5.2%	11.3%	5.8%
Protective services case closed due to client decision to not continue	0.0%	5.9%	3.7%	2.1%	1.4%	4.2%	2.8%	2.4%	2.9%
Protective services case closed due to death of client	0.4%	0.5%	0.7%	2.0%	0.3%	0.5%	1.2%	0.6%	1.1%
Protective services case opened but not completed (non-specific)	0.4%	0.4%	0.5%	0.6%	0.1%	0.3%	0.6%	0.5%	0.5%
Unknown	2.3%	2.6%	4.6%	2.2%	4.5%	2.4%	2.0%	2.0%	2.3%
Total	529	10,503	20,034	16,361	17,361	10,964	102,213	850	151,108

**Exhibit B.2: Victim Maltreatment by Age** 

Age	Abandonment	Emotional abuse	Exploitation	Neglect	Other	Physical abuse	Self-neglect	Sexual abuse	All Victims
Age 18-29	14.4%	5.7%	2.3%	6.6%	8.6%	8.0%	2.3%	27.9%	3.3%
Age 30-39	6.4%	3.8%	1.8%	4.5%	5.8%	5.5%	2.5%	13.7%	2.9%
Age 40-49	7.5%	4.5%	2.2%	4.3%	4.7%	4.8%	3.9%	8.7%	3.8%
Age 50-59	15.9%	9.1%	5.1%	8.6%	12.7%	8.7%	10.8%	12.8%	9.6%
Age 60-69	23.3%	23.6%	20.6%	16.0%	20.3%	23.6%	26.4%	12.8%	24.3%
Age 70-74	9.8%	15.2%	18.1%	11.5%	12.6%	14.3%	16.2%	6.4%	15.7%
Age 75 through 84	12.1%	24.4%	31.0%	25.1%	22.2%	22.0%	25.0%	10.9%	25.4%
Age 85 and older	9.5%	12.2%	17.8%	22.3%	11.7%	11.8%	11.8%	5.9%	13.7%
Unknown	0.8%	1.6%	1.2%	1.1%	1.5%	1.3%	1.2%	1.0%	1.2%
Total	529	10,698	21,831	19,891	1,870	11,392	113,016	893	166,117

Source: Case Component.

**Exhibit B.3: Victim Maltreatment by Gender** 

Race	Abandonment	Emotional abuse	Exploitation	Neglect	Other	Physical abuse	Self-neglect	Sexual abuse	All Victims
Female	50.7%	70.0%	56.6%	60.5%	60.7%	63.6%	54.6%	80.7%	56.6%
Male	48.8%	28.8%	38.5%	38.6%	38.8%	35.6%	44.3%	17.2%	41.8%
Transgender	0.0%	0.1%	0.1%	0.02%	0.0%	0.02%	0.02%	0.3%	0.03%
Unknown	0.6%	1.1%	4.8%	0.8%	0.5%	0.8%	1.1%	1.7%	1.6%
Total	529	10,698	21,831	19,891	1,870	11,392	113,016	893	166,117

**Exhibit B.4: Victim Maltreatment by Race** 

Race	Abandonment	Emotional abuse	Exploitation	Neglect	Other	Physical abuse	Self-neglect	Sexual abuse	All Victims
White	64.5%	67.2%	51.1%	60.9%	52.7%	67.6%	65.2%	64.2%	62.7%
Black/African American	14.6%	13.1%	10.6%	16.6%	7.1%	13.2%	14.5%	14.7%	13.8%
Other	1.5%	1.3%	4.2%	2.6%	0.5%	2.2%	1.2%	1.2%	1.8%
Asian	0.2%	1.0%	0.7%	0.9%	0.4%	1.3%	0.7%	0.7%	0.8%
Hawaiian/Pacific Islander	0.4%	0.1%	0.2%	0.2%	0.0%	0.3%	0.1%	0.3%	0.2%
Native American/ Alaskan Native	0.2%	0.5%	0.6%	0.7%	0.5%	0.6%	0.8%	1.0%	0.7%
Unknown	18.9%	17.3%	33.1%	18.7%	39.1%	15.4%	18.0%	18.4%	20.5%
Total	529	10,687	21,813	19,884	1,869	11,385	113,016	893	166,085

Source: Case Component. States may select multiple values for each individual.

**Exhibit B.5: Victim Maltreatment by Ethnicity** 

Ethnicity	Abandonment	Emotional abuse	Exploitation	Neglect	Other	Physical abuse	Self-neglect	Sexual abuse	All Victims
Hispanic, Latino/a, or Spanish	3.7%	5.1%	2.7%	4.4%	0.9%	7.5%	11.3%	4.0%	9.2%
Not Hispanic, Latino/a, or Spanish	60.8%	72.7%	57.0%	76.1%	34.2%	72.6%	68.9%	71.8%	68.0%
Unknown	35.5%	22.2%	40.3%	19.5%	64.9%	19.9%	19.8%	24.2%	22.9%
Total	485	8,952	19,432	15,731	1,600	10,344	110,225	797	154,007

Source: Case Component. States may select multiple values for each individual.

**Exhibit B.6: Victim Maltreatment by Disability** 

Disability	Abandonment	Emotional abuse	Exploitation	Neglect	Other	Physical abuse	Self-neglect	Sexual abuse	All Victims
Ambulatory	30.2%	23.7%	21.5%	35.8%	14.2%	22.6%	34.6%	14.5%	31.9%
Cognitive	33.3%	20.5%	24.0%	36.2%	22.9%	24.1%	18.7%	35.7%	20.8%
Communication	14.1%	6.0%	5.0%	14.6%	5.5%	8.1%	3.7%	10.1%	5.2%
Hearing	4.3%	5.0%	5.1%	6.5%	6.2%	4.1%	3.5%	4.1%	3.9%
Independent Living	51.4%	25.8%	24.9%	40.9%	26.2%	26.7%	15.6%	32.8%	19.4%
No Disability Identified	3.9%	12.0%	13.7%	2.4%	4.0%	11.8%	2.3%	6.8%	4.4%
Other	5.1%	18.4%	16.1%	17.3%	48.4%	13.0%	7.6%	17.6%	9.8%
Self-Care	50.6%	22.0%	19.8%	38.9%	21.5%	21.7%	15.6%	24.7%	18.3%
Vision	2.7%	5.3%	5.1%	5.6%	1.8%	4.2%	4.1%	2.5%	4.2%
Unknown	22.4%	33.5%	33.9%	28.0%	25.8%	33.9%	42.7%	26.3%	39.9%
Total	255	6,965	11,970	12,553	275	8,686	82,974	676	113,696

Source: Case Component. States may select multiple disabilities for each individual.

**Exhibit B.7: Victim Maltreatment by Previous Report** 

Previous Report	Abandonment	Emotional abuse	Exploitation	Neglect	Other	Physical abuse	Self-neglect	Sexual abuse	All Victims
No	39.3%	57.7%	58.7%	49.4%	48.1%	56.1%	51.8%	45.1%	53.1%
Yes	60.7%	40.5%	39.7%	48.6%	51.9%	42.2%	47.6%	52.3%	45.9%
Unknown	0.0%	1.8%	1.6%	2.0%	0.0%	1.7%	0.6%	2.6%	1.0%
Total	511	9,503	15,062	15,862	1,723	10,107	93,536	761	135,300

**Exhibit B.8: Victim Maltreatment by Perpetrator Age** 

Age	Abandonment	Emotional abuse	Exploitation	Neglect	Other	Physical abuse	Sexual abuse	All Perpetrators
17 and younger	0.0%	0.9%	0.2%	0.1%	0.1%	2.4%	1.4%	0.7%
18-29	7.4%	6.9%	5.7%	4.1%	10.3%	8.8%	6.4%	6.2%
30-39	7.4%	12.3%	10.7%	5.5%	8.4%	10.9%	8.5%	9.1%
40-49	12.2%	13.4%	10.2%	7.5%	7.1%	10.6%	9.1%	9.6%
50-59	17.4%	14.0%	9.8%	8.9%	13.7%	11.0%	11.1%	10.5%
60-69	23.2%	9.8%	5.3%	8.2%	18.7%	7.8%	9.7%	7.9%
70-74	8.4%	3.1%	1.3%	2.6%	9.5%	3.6%	3.8%	7.9%
75-84	3.5%	3.6%	1.1%	3.4%	14.3%	4.9%	3.6%	3.4%
85 and older	1.6%	1.4%	1.0%	1.8%	7.1%	2.1%	2.2%	1.8%
Unknown	19.0%	34.7%	54.8%	57.8%	10.9%	37.9%	44.1%	48.0%
Total	311	6,961	14,647	13,110	1,855	7,855	503	40,699

Source: Case Component.

**Exhibit B.9: Victim Maltreatment by Perpetrator Gender** 

Gender Identity	Abandonment	Emotional abuse	Exploitation	Neglect	Other	Physical abuse	Sexual abuse	All Perpetrators
Female	52.4%	37.3%	38.8%	42.1%	57.8%	37.1%	11.7%	39.5%
Male	38.9%	51.4%	31.9%	28.1%	38.5%	53.7%	69.9%	37.5%
Transgender	0.0%	0.1%	0.1%	0.1%	0.2%	0.1%	0.1%	0.1%
Unknown	8.8%	11.2%	29.1%	29.6%	3.5%	9.2%	18.3%	23.0%
Total	422	8,928	17,277	15,866	1,851	9,633	761	48,695

**Exhibit B.10: Victim Maltreatment by Perpetrator Relationship** 

Kinship Relationship	Abandonment	Emotional abuse	Exploitation	Neglect	Other	Physical abuse	Sexual abuse	All Victims
Child	11.4%	29.5%	21.5%	19.1%	8.1%	25.4%	2.9%	21.4%
Domestic partner, including civil union	0.2%	2.4%	0.8%	0.9%	0.5%	3.0%	2.4%	1.4%
Grandchild	1.2%	6.0%	5.8%	2.0%	1.0%	6.1%	0.9%	4.4%
Grandparent	-	0.1%	0.03%	0.2%	-	0.1%	0.3%	0.1%
Parent	6.3%	4.2%	2.1%	6.2%	1.3%	4.6%	6.6%	3.9%
Sibling	4.1%	3.2%	2.4%	2.9%	0.4%	3.7%	2.7%	2.7%
Spouse	5.6%	13.3%	1.6%	10.9%	2.2%	15.6%	6.7%	8.6%
Other relative	5.6%	12.4%	11.8%	6.4%	1.5%	7.9%	11.3%	8.8%
Yes (not specific)	0.2%	4.0%	5.1%	3.5%	2.3%	2.7%	9.1%	3.7%
None	58.0%	11.3%	26.1%	17.0%	77.5%	21.0%	40.4%	23.0%
Unknown	7.3%	13.6%	22.8%	30.9%	5.1%	9.9%	16.6%	22.0%
Grand Total	412	8,397	15,302	14,598	1,841	9,122	656	44,827