Exploring the motivations of perpetrators who abuse vulnerable adults

Final Report

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Executive Summary

Introduction
Vulnerable adults are at risk from abuse. Between 2009 and 2010 4913 investigations into abuse against vulnerable adults were conducted in Wales (CSSIW, 2010). The high prevalence and awareness has resulted in increased policy interest in adult protection at the Welsh and English level (Department of Health 2000; National Assembly of Wales 2000).

One important aspect of adult protection is preventing abuse from happening in the first place. However it has been acknowledge that adult protection can be more reactive than proactive (Department of Health, 2009). The importance of work in the prevention field cannot be ignored.

While some notable efforts have been made to minimise the risk of abuse, notably the development of the Vetting and Barring scheme as a result of the Safeguarding Vulnerable Groups Act (2006) and awareness training for health and social workers, there remains some concerns regarding how far these initiatives stop abuse from happening. First, it is not clear to what extent prevention initiatives are supported by a research evidence base. Second, interventions such as the Vetting and Barring scheme may stop known perpetrators who are intent on gaining access to vulnerable adults from doing so, but this only covers part of the picture. Attempts to safeguard vulnerable adults from abuse need to encompass consideration of why people, including those who may be genuinely caring, can become perpetrators.

A primary driver for undertaking this study came from the practitioner members of the research team who felt that while people working in adult protection had ideas about why abuse occurred, that these ideas were seldom discussed and had not been tested. The academic members of the research team were aware of a lack of attention on perpetrator motivation in the research literature. This important aspect that should underpin the prevention and safeguarding work has been little explored. A full picture of motivation is best achieved from a three pronged attack: adult protection investigators, perpetrators themselves and victims of abuse. The views of victims were included in a previous study by members of the research team (Davies et al, 2009). It was felt that more preparatory work was needed prior to a study with perpetrators. Therefore it was proposed that this scoping work should be undertaken into the opinions of adult protection professionals about motivation.

The study took as its starting point two ideas about why abuse occurs that are commonly discussed in practice – that of proactive and reactive motivations. The following definitions were used during this study:

THE REACTIVE ABUSER - The de-motivated, de-valued, stressed employee (or family member) who lacks adequate supervision and/or management support and commits acts of abuse out of desperation in impossible conditions (White et al, 2003). Often this abuse is linked to a ‘critical incident’ where the potential perpetrator felt pushed to take the step to become an abuser.

THE PROACTIVE ABUSER - The serial abuser (or ‘bad apple’) who either has sought out contact with the vulnerable adult (e.g. through developing a friendship or working in the care sector) in order to commit acts of abuse, or has been opportunist. (Manthorpe & Stanley, 1999; White et al 2003).

The overall aim of this study was to understand what motivates someone to abuse a vulnerable adult and to apply this understanding to prevention, protection and safeguarding policies and practice. Specific research questions were:
• What is the evidence to support the existence of ‘reactive’ and ‘proactive’ perpetrators?
• What other explanations exist for potential perpetrator motivation?
• To what extent can an understanding of motivations to commit generic violent crimes inform our understanding of motivation to abuse vulnerable adults?
• To what extent are perpetrator motivations reflected in protection and safeguarding strategies in Wales?
• In what ways can protection and safeguarding policies and practice be improved by increased understanding of perpetrator motivation

Method
The study was multi-phased and multi-method including a literature review, an all Wales online survey, a series of case studies and the consideration of provisional findings by an Expert Focus Group consisting of Adult Protection Coordinators. Interpretative Phenomenological Analysis (IPA) was applied to the qualitative data. A phenomenological approach was seen to be appropriate as it uses an appreciation of context in shaping how participants understand the world around them. Specifically IPA involves the researchers making meaning of the participants own meaning making process.

The sample consisted of professionals who had experience of adult protection usually as an adult protection investigator, and spanned four NHS trusts, all local authorities in Wales, police, independent sector provider organisations and academics and trainers in the field of adult protection. (n=51). The sample breakdown was 34 completions of the online survey, 7 interviews for the case study phase and 10 attendees at the Expert Focus Group discussion. Permission to undertake the survey involving health staff was received from the South Wales Research Ethics Committee and to undertake the case studies from the Research Ethics Committee at the University of Wales, Newport.

Findings and Discussion
The aim of the literature review was two-fold. First to identify any evidence and ideas re motivation that emerge in the adult protection literature and second to collect hypotheses on motivation for other violent crimes (e.g. domestic violence, physical assaults) that may have applicability for understanding the abuse of vulnerable adults. Fulfilling these aims provided a platform upon which the data collection tools in subsequent phases were built. The literature review showed research evidence to support ideas on power / control, negative attitudes, the life experience of perpetrators, lack of support in the face of stress and burden, the society and environment context in which abuse occurs and problems within relationships.

The phase two online survey tool was developed based on these ideas and piloted outside Wales. 34 people took part in the survey with a 50% gender split. A wide range of working contexts and levels of experience were represented. High levels of agreement were found with the existence of proactive and reactive categories of motivation. Themes that resulted in particularly strong levels of agreement related to power / control, the mental state of the perpetrator, the burden of caring and the working environment of staff perpetrators.

Further analysis comparing the views of staff employed in care contexts with those employed in law enforcement found some differences. In particular, care staff seemed to give greater significance to the context as leading to reactive abuse and this may reflect their wider knowledge of the circumstances that pre-date incidents of abuse. Another finding is the high proportion of respondents who had no view on some of the factors presented (particularly in relation to a perpetrators personality or life experience) suggesting that this information is often not available to practitioners. In trying to make sense of why abuse happens there was strong agreement that different types of perpetrators (e.g. staff
or family) abuse for different reasons and that different types of abuse are more prevalent in some settings than others. A moderate level of agreement was found that different forms of abuse have different motivations.

Qualitative analysis of case studies and the Expert Focus Group discussion gave further support to aspects of reactive and proactive motivation but also placed increased emphasis on personal and interpersonal factors. A key finding of this study was that in addition to support for proactive and reactive categories that a third category of motivation exists. This category refers to personal and relational aspects of motivation. It covers personal characteristics (e.g. insecurity) and inter-personal characteristics (e.g. a pattern of violence between two people in a relationship. While these issues were distinct enough to stand outside the proactive and reactive category there is clearly overlap with an individual’s motivation sometimes mapping across more than one category. There was also the perception of motivation shifting over time in cases of repeat offending.

The case studies analysis also generated strong thoughts about how perpetrator motivation is looked at within the context of adult protection investigations. Variability appears to exist across Wales in determining to what degree why abuse happened and how it was able to happen are questioned. In some investigations a focus on what did happen and what should we do about it predominate. The reasons for this variability appear to depend on the skills / experience and interest of the adult protection investigator. In addition tools to assist an investigator in understanding why abuse has happened (for example, a forensic history) are not used as standard practice throughout Wales. The outcome of investigations could be said to be in part influenced by the resources available to investigators. Many investigators feel that adult protection investigations can have compromised outcomes especially when the perpetrator has an ongoing relationship with the victim, such as when they are a family member. Finding ways to better understand the perpetrator and engage them in the process appears to be important in improving longer term protection.

The Motivation Mapping Tool (MMT) has been proposed as a tool to stimulate dialogue between adult protection practitioners in order to make explicit the inevitable speculation about motivation that occurs between people. Many practitioner spoke positively about the benefits of discussing cases in detail with others with knowledge of the case. Sadly there is not a consistent approach to discussing motivation with some practitioners paying more attention to this than others. The MMT could be used both as a dialogic tool but also as a step towards identifying prevalence of aspects of motivation.

Conclusions
The strength of this study comes from the high level of knowledge on adult protection of the participants in phases two and three of the study. Their roles as adult protection practitioners meant that their views are informed by current adult protection practice and policy. Therefore findings from this study will help inform adult protection policy and practice as well as provide a research baseline from which to carry out further investigations within this research area, most notably with perpetrators who have abused vulnerable adults. Recommendations for practice include developing a greater proactive stance in adult protection, generating creative ways of engaging with perpetrators, covering perpetrator motivation in investigator training and increasing access to methods of identifying perpetrator motivation within investigations. Recommendations for policy included adding information on working with perpetrators during an investigation to the Wales guidance, the inclusion of information on perpetrator motivation in the Wales monitoring system and increasing the focus of prevention in families in the prevention strategies of adult protection committees. Recommendations for research included self-report work with perpetrators of abuse, looking at how motivations map onto prevention strategies, piloting the use of the Motivation Mapping Tool with adult protection
practitioners and looking at how motivation to care (as opposed to abuse) can be maximised through intervention programmes.

Introduction

Many vulnerable adults are at risk of abuse from various people, including care staff, family members, friends, other vulnerable adults or anyone else who comes into contact with them. Frequently the abuser appears to have some form of power or control over the vulnerable adult. The CSSIW Protection of Vulnerable Adults Monitoring Report 2009-10 indicates that during the year there were 4,913 investigations into allegations of adult abuse and of these 41% involved abuse allegedly perpetrated by a member of staff; 27% by a family member and 11% by another vulnerable adult. Despite the high prevalence and increasing policy interest in adult protection some important aspects of this subject remain little explored.

‘In Safe Hands’, the National Assembly for Wales (2000) guidance on the protection of vulnerable adults from abuse, shows a commitment at a national level to safeguarding vulnerable adults (the lead applicant for this study is currently involved with a review of these guidelines). In addition the Welsh Assembly Government convened an Adult Protection Project Board to examine the robustness of current adult protection policy and to consider future developments (a member of the research team for this study sits on this Board). Although this policy activity is important, previous work undertaken by members of the research team suggests that it is how adult protection policy is implemented at grass roots level that is of equal relevance (Northway et al 2007). This study spanned adult protection policy and practice through considering how perpetrator motivation is perceived in practice and how this is reflected in current policies and procedures.

Perpetrator motivation in adult protection is an under-explored area and one that is important in extending the protection agenda (Harper et al 2002). The recent report into the consultation into the English policy guidance ‘No Secrets’ suggested that “Unless work takes place with abusers, they will continue to abuse” (2009: 58). Given the scarcity of research in this area there was a need to carry out a scoping study prior to a further, more in depth, study with perpetrators.

The Welsh Assembly Government’s policy guidance document ‘In Safe Hands’ (2000) and the recent Wales Interim Adult Protection Policy and Procedures (SSIA, 2010) demonstrate national level interest in policies that protect vulnerable adults from abuse. Since the guidance document was published in 2000 it has been acknowledged, in a study undertaken by the research team, that the adult protection agenda has tended to focus on the response to abuse that has already happened rather than being strongly proactive in preventing abuse (Northway et al., 2005). Some research and practice initiatives are now focusing on prevention topics such as early indicators of precursors to abuse (Marsland et al., 2007) or educative programmes for vulnerable adults (Collins & Walford, 2008). However, very little is currently known about the motivations of perpetrators of abuse, knowledge of which is important in shaping the development of prevention strategies. Without this information there is a risk that resources put into prevention will fail to reduce the amount of abuse happening.

The absence of widespread research into the motivation of those who abuse vulnerable adults is, to some extent, reflected in other areas of research. For example, while there is much research in to the area of domestic violence, research into the motivation for domestic violence is similarly sparse. An important exception to the absence of motivation research is in the area of sexual offending, which has received a high level of research attention. While motivation for sexual offending against vulnerable adults is still largely under-researched (Jeary, 2005) the decision was taken to focus on non sexual
abuse against vulnerable adults given the likelihood that there are differences between sexual offending and other forms of vulnerable adult abuse.

In the absence of research on perpetrator motivation, hypotheses about motivation are largely unsubstantiated, relying on anecdote and appearing as opinion pieces in the literature. This literature and the clinical experience of the research team indicated two categories of motivation to perpetrate the abuse of vulnerable adults:

**THE REACTIVE ABUSER** - The de-motivated, de-valued, stressed employee (or family member) who lacks adequate supervision and/or management support and commits acts of abuse out of desperation in impossible conditions (White et al, 2003). Often this abuse is linked to a ‘critical incident’ where the potential perpetrator felt pushed to take the step to become an abuser.

**THE PROACTIVE ABUSER** - The serial abuser (or ‘bad apple’) who either has sought out contact with the vulnerable adult (e.g. through developing a friendship or working in the care sector) in order to commit acts of abuse, or has been opportunist. (Manthorpe & Stanley, 1999; White et al 2003).

The various schemes used to help protect vulnerable adults can be aligned to these two categories. For example, the social care inspection system exists to ensure consistent standards are upheld in social care agencies, which should reduce reactive abuse. In addition, the system of Criminal Records checks and the Vetting and Barring system should stop people barred from working with vulnerable adults gaining employment and should reduce proactive abuse. What is clear is that while these schemes contribute to protection broadly, they are not informed by detailed understanding of the motivations to commit abuse. In addition it is not clear if other categories of motivation exist that similarly need specific interventions directed at addressing them.

This study fills an important knowledge gap to both better inform these key schemes and to identify additional ways to protect vulnerable adults from abuse via policy and practice initiatives.
Method

Study Context
A multi-phase, multi-method design was chosen to produce a combination of quantitative and qualitative data. While a unique and important piece of work in its own right, this study can also be seen as ‘scoping’ work prior to a second study with perpetrators. Given the paucity of research into perpetrator motivation, it was felt more ethically appropriate to first undertake an exploratory piece of work, such as this, in order to approach the perpetrator study from a more informed standpoint.

The study has been managed by a research team at the University of Wales, Newport (UWN) and the University of Glamorgan. The team also comprised practitioner members (senior managers in Social Services) who took part in the literature review, categorising of motivations, and survey design as well as identifying the all Wales sample using well established existing contacts (for example the four regional adult protection forums across Wales). One practitioner team member is an Adult Protection Coordinator and the other is Chair of a Regional Forum. Their expertise has been invaluable in ensuring that the study was relevant to the challenges facing modern adult protection practice.

This scoping study comprised three phases with each built on the previous phase.

Phase 1 – Literature review
A detailed search of the available literature has been undertaken using the following search strategy (Table 1). A two strand literature review was conducted. The first strand examined the adult protection literature on perpetrators and the context of abuse. The second strand examined broader literature for perpetrator motivation themes, for example literature on violent crimes and domestic violence. The purpose of the review was to begin to address research questions 1, 2 and 3 and to provide a structure for the survey in phase 2. Searches were conducted electronically and also manually using hard copies of journal in the library at University of Glamorgan. Details of journals searched and databases used can be found in Table 1 below.

All members of the team undertook some of the literature review including the Social Services professionals who brought their clinical experience to determining ideas in the literature that may have relevance. A standard data collection form (see Appendix 1) was used to collate information to inform the literature review.

In order to develop and organise emerging themes, the research team shared their papers and discussed purported motivations of abuse to see if there was any evidence of ‘proactive’ and ‘reactive’ dimensions within those examples. It was apparent that the examples found in the literature did appear to fit either the proactive or reactive motivations which would support the prevalence of these two categories and would warrant further exploration in the survey. Motivations were also categorised by the team between proactive and reactive to assist with later data analysis (Table 2).

The purported motivations of abuse from the literature were used to structure the survey in order to gauge the opinions adult protection professionals had of them. This helped to ascertain the extent to which motivations from generic violent crime had relevance to the abuse of vulnerable adults.

Reported perpetrator motivations and emergent motivations and related ideas from the literature search were identified, categorised and used to design the Phase 2 Survey (see Table 2). The categorisation process into ‘reactive’, proactive’ or ‘other’ was undertaken by the entire research team who had all been involved in reviewing the literature – and therefore had an understanding of the context from which the motivations occurred. Some motivations fitted very neatly into one category or another,
whilst others were more complex and debate ensued within the research team regarding the most difficult to categorise motivations. However, this categorisation process was never meant to be definitive as one of the main intentions of the survey was that not only a greater understanding would be achieved about commonplace motivations but that their inter-relationship would be explored.

Table 1: Phase 1 Search Strategy

<table>
<thead>
<tr>
<th></th>
<th><strong>Search A – adult protection literature and the context of abuse</strong></th>
<th><strong>Search B – perpetrator motivation (outside adult protection literature)</strong></th>
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<tr>
<td><strong>Aim</strong></td>
<td>To ascertain to what extent the literature supports different theories of motivation e.g. ‘proactive’ or ‘reactive’ abusers or other theories.</td>
<td>To explore theories of motivation to commit other abuse / violent crimes in order to examine their applicability to the abuse of vulnerable adults.</td>
</tr>
<tr>
<td><strong>Key words (all crossed referenced)</strong></td>
<td>1) abuse, adult protection, abuser, perpetrator, motivation, vulnerable adult, mistreatment, poor practice, crime, offending, offender, victims, prevention, inquiries, POVA, investigations, safeguarding, neglect 2) perpetrator motivation, motivation, prevention, protection, context of abuse, bad apple, power, offending behaviour</td>
<td>1) domestic violence, child protection, violent crime, compromised parenting, child abuse 2) perpetrator motivation, motivation, prevention, protection, context of abuse, bad apple, power, offending behaviour</td>
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| **Electronic searches** | ASSIA  
Criminal justice abstracts  
IBSS  
Ingenta connect  
Psyc info  
Proquest psyc journals  
Social care online  
Social science citation index  
Google scholar | ASSIA  
Criminal justice abstracts  
IBSS  
Ingenta connect  
Psyc info  
Proquest psyc journals  
Social care online  
Social science citation index  
Google scholar |
| **Manual searches** | The Journal of Adult Protection  
Community Care | Community Care |
| **Inclusion criteria** * | English language  
Priority in reviewing will be given to articles post 1995 to capture literature just prior to the introduction of national policy guidance and within a UK context. | English language  
Priority in reviewing will be given to articles post 1995 to capture literature just prior to the introduction of national policy guidance and within a UK context. |
| **Exclusion criteria** | Literature where **main** focus is sexual abuse / sex crimes / children will not be included ¹ | Literature where **main** focus is sexual abuse / sex crimes / children will not be included. |

¹This exclusion was decided upon due to the hypothesis that the motivations for paedophilia and sexual offending are likely to be different to those more commonly found in vulnerable adult abuse and that sexual crimes already have a substantial literature base.
Table 2: Ideas on perpetrator motivations from the literature

<table>
<thead>
<tr>
<th>Reactive</th>
<th>Proactive</th>
<th>Other</th>
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<tr>
<td>Masculinity; want to be seen as &quot;hard&quot;</td>
<td>Substance abuse</td>
<td>Different abuse, different settings</td>
</tr>
<tr>
<td>Environment need to promote; competence, autonomy, relatedness</td>
<td>Female jealousy</td>
<td>Different abuse, different motivations</td>
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<tr>
<td>POVA process itself takes time = neglect of others</td>
<td>If care givers are cognitively impaired</td>
<td>Organismic integration (external becomes internal)</td>
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<td>Staff not seeing behaviour as abusive</td>
<td>Vigilantes</td>
<td>Gender differences in motivations</td>
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<td>Understaffing</td>
<td>Need for authority</td>
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<tr>
<td>Staff mental health/stress</td>
<td>Male - &quot;being playful&quot;</td>
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<tr>
<td>Lack of respite</td>
<td>Male - to control</td>
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<tr>
<td>Carer burden</td>
<td>Unable to express verbally = violence</td>
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<tr>
<td>Violence is socially tolerated</td>
<td>Higher status than victim</td>
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<td>Lack of motivation</td>
<td>Punishment for worse behaviour</td>
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<td>Organisational isolation</td>
<td>Use of negative coping strategies</td>
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<td>Violence is normalised</td>
<td>Ego-centricity</td>
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<td>Difficult working conditions</td>
<td>Female and male – anger</td>
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<td>Lack of resilience</td>
<td>Isolation</td>
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<td>Organisation culture that condones physicality</td>
<td>Misunderstanding between service users</td>
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<td>Lower levels of education</td>
<td>More care needs = increased vulnerability</td>
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<td>Power is polymorphus not just dyadic</td>
<td>Typology: generally violent</td>
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<td>Environment of control</td>
<td>Childhood aggression</td>
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<td>Mutually violent relationship</td>
<td>Carers mental health</td>
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<td>Pre-morbid relationship poor</td>
<td>Male - escalation prevention</td>
<td></td>
</tr>
<tr>
<td>Staff victimisation</td>
<td>History of abuse is not necessary</td>
<td></td>
</tr>
<tr>
<td>Need to restrict</td>
<td>Need to belittle</td>
<td></td>
</tr>
<tr>
<td>Changing attitudes over time</td>
<td>Obsession</td>
<td></td>
</tr>
<tr>
<td>Thresholds (judgements)</td>
<td>Female - self defence</td>
<td></td>
</tr>
<tr>
<td>Retribution</td>
<td>Care givers self esteem /lack of self actualising / Insecurity</td>
<td></td>
</tr>
<tr>
<td>&quot;Violent victim&quot; increases chance of abuse</td>
<td></td>
<td></td>
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<tr>
<td>Attitudes and beliefs that support abuse</td>
<td></td>
<td></td>
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<tr>
<td>Instrumental or oppressive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aggressive, defensive personality and negative relationship = violent</td>
<td></td>
<td></td>
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<tr>
<td>Juvenile history animal abuse</td>
<td></td>
<td></td>
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<tr>
<td>Hate crime - being different / racial abuse</td>
<td></td>
<td></td>
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<tr>
<td>Unmotivated</td>
<td></td>
<td></td>
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<tr>
<td>Attachment issues</td>
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Phase 2 - Survey

Survey Development
The survey was developed from emergent themes from the literature where the research team categorised purported perpetrator motivations (see Table 2). The survey was split into six main sections.

Question 1 required participants to state what they considered to be the three most important factors as to why someone may abuse a vulnerable adult based on their own experiences of adult protection investigations. The idea behind this was to collect information from the participants’ own experiences before exposing them to the ideas from the literature.

Question 2 included 71 items to reflect the proactive and reactive dimensions of Perpetrator Motivation. 41 items were included in the proactive proactive category, and 26 items were included in the reactive reactive category. Four additional items were included under the ‘other’ category, as they were identified as possible motivators but were not conceptually linked to the proactive or reactive dimensions at the literature review stage. Respondents were required to read a statement and to indicate the extent to which they agree with the statement on a Likert type scale with 1=strongly agree, 2 = agree, 3=I have no view on this factor, 4=strongly disagree, and 5=strongly disagree (Likert, 1932).

In Question 3 respondents were presented with five statements relating to factors identified from the literature as having a role in perpetrators motivations. These factors were gender differences, different settings (e.g. home, hospital), different forms of abuse (e.g. physical, verbal), different types of perpetrator (e.g. staff, family carer, friend), and the perpetrator having a personal history of being abused. Respondents were asked to rate the extent to which they agreed with the statements using a Likert scale with 1 = strongly agree, to 5= strongly disagree. It was anticipated that this information would be used to inform phase 3 of the study to ensure that selected case studies covered all the factors considered to be pertinent by the respondents.

Question 4 then asked respondent to rate, from the 71 items in question 2, five items they believe are most important in understanding why someone may abuse a vulnerable adult. Respondent were required to list them in order of importance, with 1 being the most important. This information was used to identify whether there is a general consensus amongst respondents as to the underlying motivations for perpetrators.

Question 5 then presented participants with definitions of the reactive and proactive abuser taken from the original study proposal, and asked them to rate on a Likert scale the extent to which they agree with these definitions with1 = strongly agree, to 5 = strongly disagree. Respondents were also given the opportunity to include additional comments regarding the motivation of perpetrators to abuse vulnerable adults that have not been covered by the survey.

The final section of the survey asked for demographic and background information in order to assess the sample characteristics and for between group analysis where necessary. These were kept to a minimum in order to avoid being overly intrusive and because the need to compare ideas on motivation based on different sample characteristics was not needed in addressing the research questions.
Survey Pilot
A paper based pilot survey was sent to a group of adult protection practitioners in England known to the Social Service professionals on the research team. Of twelve requests sent three returned completed surveys in addition to providing comments on wording and structure. Amendments were made based on these responses, focusing on reducing ambiguity and simplifying the language used.

Following the pilot there was some discussion about the terminology used in the study. Initially staff, carer and perpetrator were all used and this led to some confusion. However it proved impossible to reduce these to a single catch all title given that some of the questions only made sense in the context of a professional carer (e.g. issues to do with understaffing) while others could be applied to a range of perpetrators (e.g. stress). Therefore the decision was made to use two titles – staff and perpetrator – and to decide which to use for each factor based on their context in the literature. In addition, clarification on the use of these titles was given at the start of the survey. A similar discussion occurred about the use of the term ‘motivation’ has been used throughout this report to refer to reasons, explanations or factors that play a part in determining whether a vulnerable adult is abused.

A further usability pilot of research professionals at the Universities of Wales, Newport and University of Glamorgan was undertaken on the recommendation of the South East Wales Research Ethics Committee and a further six respondents undertook an online pilot survey. Adjustments were made to the survey following the pilot based on comments regarding usability and the order of questions and the final survey went live at the end of March 2011.

Data Collection
The online survey was designed with the assistance of a Learning Technologist at the University of Wales, Newport and sent out via an administrator at Powys Social Services. An online survey was considered more cost effective and less time consuming than a paper based survey, an important consideration when approaching busy adult protection professionals. Another benefit of the online survey was the ability to provide reassurances about total anonymity. An email address was required from each respondent in order to be able to provide information on the survey and to include the live link. These were sent to the Learning Technologist / Administrator to set up the link and disposed of securely. The research team were able to view the survey results but not the email address thus making it impossible to know who had returned the surveys.

A deadline of one week for returns was initially set for participants but after the week had passed it was decided to send a reminder email and allow further time to maximise the number of respondents.

Sample
The sample was made up of mainly health / social care / and law enforcement professionals who had experience of adult protection investigations (n=29). The key contacts in these agencies are easily identifiable as they have designated responsibility for adult protection. The Social Service practitioners on the research team coordinated a list of key contacts that represented all local authorities in Wales (given they are lead agencies for adult protection), key adult protection staff in four local health boards in Wales (one from each police authority area), adult protection leads in the four Welsh police forces as well as independent sector providers of services for vulnerable adults and trainers / academics who have involvement with adult protection investigations. In addition, trainers and academics with established interests in adult protection were also invited to participate (n=5).

The forthcoming survey was promoted at key adult protection events in Wales and information sheets (see appendix 2) were distributed. Interested parties were asked to provide an email address in order
that this could be passed on to the administrator who sent out further information and a link to the survey.

A total of 75 people were directly invited to participate in the online survey by email. However participants were encouraged to forward the email to other staff members, who met the inclusion criteria (involvement in adult protection). The total sample would have been slightly larger than 75 and 34 replies were received, including 17 males and 17 females, giving an approximate response return rate of 45%. Also responses were received from the full range of all Wales employer groups request including five from the Health Board, five from Higher Education & Training, seven from Independent Sector organisations, six from a Police force, and 11 from Social Services. Amongst them, participants also had a diverse background of experience in adult protection work, with nine having less than five year experience, 16 having between five to 10 years experience, and nine having more than 10 year of involvement in adult protection work. Thirteen participants were involved in less than five investigations, 12 were involved in between five to 20 investigations, and nine participants were involved in more than 20 investigations. (Sample characteristics are presented in tables 3-6).

The research team had hoped for a greater number of respondents and recognises the limitations on generalisability of resulting data from this low response rate. Results should therefore be interpreted with caution and the richness of the data generated from the length and detail of the questionnaire has allowed both the quantitative and qualitative data collected to be sufficiently rich in quality. Also responses were received from the full range of all Wales employer groups requested.

<table>
<thead>
<tr>
<th>Table 3: Gender of survey respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency</td>
</tr>
<tr>
<td>Female</td>
</tr>
<tr>
<td>Male</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Table 4: Number of adult protection investigations respondents have been involved in</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency</td>
</tr>
<tr>
<td>Less than 5</td>
</tr>
<tr>
<td>Between 5 and 10</td>
</tr>
<tr>
<td>Between 10 and 20</td>
</tr>
<tr>
<td>Over 20</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Table 5: Length of time respondents have been involved in adult protection work</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency</td>
</tr>
<tr>
<td>Less than 5 years</td>
</tr>
<tr>
<td>Between 5 and 10 years</td>
</tr>
<tr>
<td>Over 10 years</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>
Table 6: Respondents’ Employer

<table>
<thead>
<tr>
<th>Employer</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Board</td>
<td>5</td>
<td>15</td>
</tr>
<tr>
<td>Higher Education &amp; Training&lt;sup&gt;2&lt;/sup&gt;</td>
<td>5</td>
<td>15</td>
</tr>
<tr>
<td>Independent Sector Organisation&lt;sup&gt;3&lt;/sup&gt;</td>
<td>7</td>
<td>21</td>
</tr>
<tr>
<td>Police</td>
<td>6</td>
<td>18</td>
</tr>
<tr>
<td>Social Services</td>
<td>11</td>
<td>32</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>34</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

**Quantitative Data Analysis**

Data analysis was undertaken using SPSS (version 18.0). Descriptive statistics were used to give a baseline of information from the categories and each item in section 2 was examined separately for frequency of replies. Scores for the reactive, proactive, and other categories were calculated. This was followed by internal consistency reliability estimates and inter-scale correlations. The bivariate correlations were used to assess whether the measures were functioning effectively.

**Qualitative Data Analysis**

For the qualitative elements of the survey, Interpretive Phenomenological Analysis (IPA) was used. IPA focuses on participants’ sense-making of their lived experiences and the meanings that these hold for them (Chapman and Smith 2002). A structured IPA analysis method of coding (as described by Smith & Osborn, 2003) was adopted. This involves an initial reading of the data with notes made of salient points. Emergent themes are then identified and recorded before the research team look for connections between themes. The final stage of IPA involves the construction of an analysis narrative to explain themes and super-ordinate themes and uses verbatim extracts for illustration purposes.

**Phase 3 – Case Studies and Expert Focus Group**

**Interview Schedule Development**

The research team reviewed data collected from the phase 2 survey and identified questions that would provide more depth information on some of the emerging ideas. The original research questions were used to structure the schedule. A mock interview was undertaken with an Adult Protection Coordinator in order to pilot the interview schedule and some amendments were made to the wording and order of questions (see Appendix 3 for final schedule).

**Sample**

The decision was taken to focus recruitment for phase 3 on Social Services and Police personnel. The reason for this is that Social Services are the lead agency for adult protection and the Adult Protection Co-ordinators in each local authority could be regarded as ‘gatekeepers’ for information on cases. A

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<sup>2</sup> They were required to have research interests or training experience in the field of adult protection

<sup>3</sup> These organisations provide services to vulnerable adults (e.g. care homes, day care, advocacy)
Police perspective could have brought different experiences to the table but unfortunately no police recruits came forward.

Two main sources of recruitment were used. First participants in phase 2 were provided with information on the case study phase and the exclusion and inclusion criteria. They were asked to make contact with the research team if they (or someone they knew) may be interested in providing a case study. Second, publicity for phase 3 took place at a range of adult protection events in Wales and potentially interested parties were provided with information.

Six case studies were included in the study. They included a range of types of abuse (e.g. physical, financial, psychological), different types of abuser (e.g. staff, relative), different settings (home, hospital, social care), and different gender. The characteristics of the case studies are described in Table 7.

Table 7: Characteristics of investigations used as Case Studies in phase 3

<table>
<thead>
<tr>
<th>VA Gender</th>
<th>Perpetrator Gender</th>
<th>Category of vulnerability</th>
<th>Relationship of Perpetrator to VA</th>
<th>Setting</th>
<th>Type of alleged abuse</th>
<th>Source of referral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>Male</td>
<td>Older person</td>
<td>Friend/ ex partner</td>
<td>Own home</td>
<td>Physical/neglect</td>
<td>Friend/ Hospital</td>
</tr>
<tr>
<td>Male</td>
<td>Male</td>
<td>Learning disabilities</td>
<td>Carer</td>
<td>Community provider ‘group home’</td>
<td>Financial</td>
<td>Family</td>
</tr>
<tr>
<td>Male x2</td>
<td>Female x5</td>
<td>Physical disabilities</td>
<td>Staff (nurse)</td>
<td>Hospital</td>
<td>Emotional/psychological</td>
<td>Hospital</td>
</tr>
<tr>
<td>Male &amp; Female</td>
<td>Male</td>
<td>Older person</td>
<td>Relative</td>
<td>Own home</td>
<td>Physical/verbal/neglect</td>
<td>Friend</td>
</tr>
<tr>
<td>Female</td>
<td>Male</td>
<td>Learning disabilities</td>
<td>Other vulnerable adult</td>
<td>Community provider ‘group home’</td>
<td>Verbal/threatening behaviour (physical and sexual)</td>
<td>Staff</td>
</tr>
<tr>
<td>Female</td>
<td>Male</td>
<td>Elderly Mentally Infirm</td>
<td>Relative</td>
<td>Own home</td>
<td>Physical/psychological</td>
<td>Social services</td>
</tr>
</tbody>
</table>

Data Collection

Practitioners who were prepared to share a case study were contacted in order to clarify that the case met the necessary inclusion criteria. These were that the case must be closed and it must be possible to anonymise. Practitioners were reminded that all material shared with the research team must be anonymised prior to sharing. Potential participants were sent an information sheet prior to arranging an interview date (see Appendix 4). Practitioners were required to complete a consent form (see Appendix 6) prior to undertaking an interview with a member of the research team.
Case studies are a flexible method that enable a diverse range of data collection tools to be included. In this study two main tools were used in for data collection for each case study. First a copy of the key reporting data provided to the Welsh Assembly government was provided in each case. Second an interview was conducted with an adult protection investigator involved in the case. The option was given to invite other practitioners involved in the case to the interview in which case a focus group approach would have been used. Although nobody took up this option one investigator suggested that a second investigator would discuss the case on another occasion – therefore two interviews were conducted for that case study. In some cases the practitioners relied on their memory of the case but in other cases (n=4) the practitioners chose to share additional information with the research team such as case histories, minutes from meetings or protection plans. In other cases (n=2) the investigator referred to computerised records during the interview in order to check their facts. Interviews were held at a location that was preferred by the investigator and lasted between 40-90 minutes. All interviews were digitally audio recorded, transcribed and any potentially identifying information (for example, the name of a place of residence) removed.

Data Analysis
A structured Interpretative Phenomenological Analysis (IPA) approach was used to identify superordinate and sub-ordinate themes. The structured approach suggested by Smith & Osborn (2003) involves multiple reading of the transcripts with notes of interesting points being made. Recurring ideas in these notes leads to the development of emergent themes. At this stage each transcript was re-read by a second member of the research team who repeated the above process. At this point the research team met to compare ideas of sub-ordinate themes and to agree a definitive set of super-ordinate themes that emerged from the data. The final stage of IPA involves the construction of an analysis narrative to explain themes and super-ordinate themes and uses verbatim extracts for illustration purposes.

Expert Focus Group
In order to strengthen the recommendations made by the research team the outcomes of the study and ideas for policy / practice were discussed by an Expert Focus Group who met in 2011. This constituted of a group of Adult Protection Coordinators who represent each local authority in Wales although 10 coordinators attended. This meeting was run as a focus group with information being provided on the project ahead of the event and consent forms being completed prior to the start of the discussion (see appendices 5 and 6). The discussion was structured around the provisional results and ideas for recommendations. The discussion was audio recorded and analysed using the IPA method discussed above.

Study Ethical Issues
The main ethical concerns related to ensuring confidentiality and anonymity and the sensitive nature of the data. Participation in phase 2 was anonymous due to the online survey method and no identifying data was collected. Practitioners sharing case studies for phase 3 agreed for their identity to be known by the research team for the purposes of conducting interviews. However their anonymity was assured in terms of the data that was used for the analysis. They were required to anonymise written information shared with the research team and identifying information on the recordings was removed at the transcription stage. Sometimes taking part in adult protection research can be distressing for participants and measures need to be taken to deal with this. This was not a concern in this study given that all participants were professionals who regularly deal with adult protection cases. Despite this reassurances were given about the voluntary nature of participation and the right to not answer a particular question.
Permission to undertake the phase 2 survey was received from the South Wales Research Ethics Committee which was essential due to the involvement of health board staff. In addition formal permission was sought from the four Research and Development committees within the participating health boards. For phase three of the study (that did not involve health board staff) ethical approval was sought and gained from the University of Wales Newport’s School of Health and Social Science Ethics Review Board.

**Study Aim and Research Questions**

The overall aim of the study was to improve understanding of the reasons people abuse vulnerable adults in order to inform adult protection policy and practice. This aim was addressed via the following research questions:

1. What is the evidence to support the existence of ‘reactive’ and ‘proactive’ perpetrators?
2. What other explanations exist for potential perpetrator motivation?
3. To what extent can an understanding of motivations to commit generic violent crimes inform our understanding of motivation to abuse vulnerable adults?
4. To what extent are perpetrator motivations reflected in protection and safeguarding strategies in Wales?
5. In what ways can protection and safeguarding policies and practice be improved by increased understanding of perpetrator motivation?
Findings – Phase 1 - Literature Review

Introduction
There are many interesting papers on issues of abuse in relation to vulnerable adults. Members of the research team are familiar with the adult protection literature due to their previous research in this area which found several recurrent topics: prevention and protection, reporting, joint investigations, justice, aftercare and monitoring (Northway et al 2005). Perpetrator motivation is rarely the focus of these articles but some references to the context in which abuse occurs do appear. While many adult protection articles were identified in the literature search and read for any content on motivation, if this was not found they are not included in this literature review. In addition the adult protection literature has given attention to what makes certain individuals particularly vulnerable to abuse (for example Gilson et al 2001), and again while these papers have been read, they have only been included if they make reference to factors that relate to perpetrator motivation.

Another area not considered in this review is research into the neurobiological underpinnings of violence (see Rhatigan et al 2005). The rationale for this is that the focus of the study is on the motivations perceived to be relevant by adult protection professionals. These people are rarely medical or scientifically trained staff and are unlikely to have a detailed understanding of this area. Importantly studies into neurobiology often make reference to the wider social and contextual factors that determine violence and these will be explored in this review.

The aim of the literature review was two-fold. First to identify any ideas on motivation that emerges in the adult protection literature and second to collect ideas on motivation for violent crimes (e.g. domestic violence, physical assaults) that may have applicability for the abuse of vulnerable adults. Fulfilling these aims provided a platform upon which the data collection tools in subsequent phases could be built.

Proactive and reactive motivations used in the study are widely referred to anecdotally in the adult protection community. There are even some examples of them being referred to in those terms in the literature (for example Rosen et al 2005; Ross & Babock, 2009). There are very few articles that relate wholly to motivation to abuse vulnerable adults. An exception is the research by Hussein et al (2009a). This was a study that was able to gain data about the possible mitigating factors expressed by staff referred to the POVA list\(^4\) (n=135). It did not gather data on those who did not offer any mitigation so it cannot be seen as a complete account of perpetrators’ motivations. However it is still provides rare insight into motivation for vulnerable adult abuse and the results of this research are referred to where relevant in this review.

A pre-determined structure was not opposed on this review. Rather the sub-headings represent key topics in the literature and material from a wide variety of research areas is presented under each heading. The six key topics are power and control; attitudes; personal characteristics and life experience of perpetrator; society and environments; lack of support and problems within relationships.

Power and Control
Much of the adult protection literature talks about how perpetrators of vulnerable adult abuse are often in positions of influence over the vulnerable adult. While this may be inevitable there is some

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\(^4\) A list of staff who have harmed vulnerable adults and are banned from this line of work this has now been superseded by the Independent Safeguarding Authority’s administration of the Vetting and Barring Scheme.
evidence that attempts to maximise this power is related to acts of abuse. Research indicates that the desire for control or the actual assertion of control play a part in violent behaviour (Barter, 2007; Curry et al 2009; Hamberger et al 1997; Lowenstein & Ron, 1999; Ross & Babcock, 2009; Rogers et al, 2005; Swan & Snow, 2003). There is wide agreement that power and control is more commonly found in male violence (Kernsmith, 2005).

The influential power / control cycle (also known as the Duluth model) developed by Pence & Paymar (1993) identifies what are seen as strategic choices which allow men to maintain their domination over women and that this in turn links to violence. This link is backed up in the research. For example Felson & Outlaw (2007) found that more controlling behaviour in husbands correlated with marital violence. However, this same research suggested that methods of control vary, with women more likely to use non-violent methods even though they shared the same motivation to control. This is important as it suggests a complex multiplicity of influences that determine whether a factor that contributes to violence actually leads to violence.

While non violent methods of oppression and control may not inevitably lead to violence they increase vulnerability (DeHart et al 2009; Lindhorst & Tajima, 2008). For example, restricting freedom of choice increases dependence on a potential perpetrator and can disempower the individual so heightening their vulnerability (Furness, 2006; Hamby, 1996; White et al 2003). In addition power is cited as a key factor in non violent abusive behaviour such as workplace bullying (Hodson et al 2006). Acts of abuse are often associated with the assertion of power but the role of power in setting the context in which abuse occurs also seems significant. It has been suggested that people can class certain people as being easy targets if they are weaker than themselves. Increasing dominance over these targets is associated with increasing risk of violence (Hamby, 1996).

When people are dependent on others it appears to increase their vulnerability to abuse through an inequality in their power and this is not only the case with vulnerable adults. For example, when women with insecure immigration status are suffering domestic abuse and are isolated from external sources of support (Anitha, 2008). Research by Rogers et al (2005) suggests that power is not a fixed construct but rather it is the perception of power and level of satisfaction with power within a relationship that is most important. Their focus was on abuse in domestic relationships and they found that satisfaction with relationship power could act as a predictor of abuse. “Persons dissatisfied with the level of their relationship power were more likely to use psychological or physical abuse” (Rogers et al, 2005: 248). Research into womens’ violence in domestic situations emphasised the importance of context and how women perceive they lack power in their relationships (Miller & Meloy, 2006; Swan & Snow, 2006). Similarly Hamby (1996) refers to a lack of power triggering violence in some. Certainly the idea of power equating to violence is too simplistic, but equally that lack of power leads to a compulsion to actively seek power is also overly reductionist. It appears to be more helpful to consider power as a relational concept with problems in the power dynamics within relationships being linked to potential violence (Lindhorst & Tajima, 2008; Rosen et al 2005; Sobsey 1994). For example, where one person has the desire to intimidate or belittle another (Barter, 2007; Ross & Babcock, 2009). Hamby (1996: 200) in research into different forms of dominance suggests that disparagement has received less research attention but emphasises its importance, stating that “these kinds of hypercritical downward social comparisons are an important way in which individuals elevate themselves with respect to their partners”.

Curiously, control not only plays a part in inciting violence but also shapes some perpetrators use of violence as a means of ending a conflict situation or to stop a situation from escalation. For example, teenage boys who are violent to their partners have reported that there violence has the function of ‘escalation prevention’ in response to female violence (Barter, 2007). Sub-cultures may express a
more generalized acceptance of violence as a legitimate aspect of dispute resolution (Michalski, 2004). Similarly the frequency with which ‘carer burden’ is cited in relation to how some carers of vulnerable adults can snap and act violently could be seen to give legitimacy to a violent resolution of conflict (Institute on Aging, 2002).

**Attitudes**

While a desire for control could in itself be seen as an unhelpful attitude there are other attitudinal positions that have links to violence and abuse. Problems with staff attitude, behaviour and boundaries were all cited in the White et al’s (2003) review into aspects of culture that promote abuse. Attitudes and beliefs that were favourable towards aggression were a factor in youth violence (Reppucci et al 1999) and elder mistreatment in nursing homes (DeHart et al 2009). One explanation is where old fashioned or institutional attitudes influence staff’s current behaviour. There is no doubt that institutionalised practices play a part in abuse (Aylett, 2008; Martin, 1984) and that some of the abuse inquiries in the 1990s and post 2000 share the cultural problems of the old inquiries of the 1960s and 1970s (Pring, 2005). However, progress has been made, with practices or attitudes that were previously seen as acceptable now being recognised as abusive (Manthorpe, 2006).

At one time being a strong man would have been seen as an asset when working with people with learning disabilities who also exhibit challenging behaviour (Martin, 1984). A positive attitude towards masculinity as being hard and physically strong is also an attitude linked to abuse. Half of men who had sexually offended and who were asked about their motivations believed they had a right to take sex because as males they were more physically powerful (Beech et al 2006). This idea is taken up Hunnicutt (2009) who suggests that ideas from patriarchy theory can help explain how men will use violence to maintain their advantage. The more they become disenfranchised the more they are likely to use violence. In some cultures laws and culture tends to support male dominance and violence is tolerated as a means by which the man maintains his position (Michalski, 2004). It is possible that these influences are widespread. “Whether feudalist, capitalist, or socialist, societies throughout history have sanctioned male violence as a means of maintaining a patriarchal social order. Men benefit materially and psychologically from the subordination of women. Further the threat of violence keeps women from actively resisting.” (Haaken, 2008; 85). Although these views may be seen as controversial by some and too over generalised to explain specific incidents of abuse against women they provide a useful insight into the context in which some abuse occurs.

In contrast to male power, attitudes of fear also appear to play a part in explaining the motivation to abuse. Research into womens’ use of force in domestic situations suggests that often they are acting in self-defence and are motivated by fear and intimidation or have a tendency towards defensiveness (Flemke & Allen, 2008; Hamberger et al 1997; Lindhorst & Tajima, 2008; Miller & Meloy, 2006; Swan & Snow, 2003; Swan et al 2008; Weizmann-Henelius et al 2003). Many of these studies refer to self-defence as either a motivation cited by the perpetrators themselves or as the conclusion drawn by others reflecting on the situation. Few studies explore what this defence means. An exception is the study by Allison et al (2008: 125) who found that some male partners’ violence seemed to be motivated by a ’distancing strategy’ “violence served to push a partner back when the perpetrator had been approached too closely and perceived no other means of escape or self-protection”. In contrast some domestic violence research suggests that a fear of abandonment or loss of the relationship may play a part in the actions of perpetrators (Flemke & Allen, 2008; Ross & Babcock, 2009). There is some evidence that this becomes a cycle of abuse whereby the victims threats to leave can increase their risk (Jewkes, 2002). A study into family murders followed by suicide reports that there is a link with separation and fear of abandonment (Johnson, 2006). Similarly, some research links jealousy or obsession to violence in domestic relationships (for example, Felson & Outlaw, 2007; Flemke & Allen,
2008; Johnson, 2006; Rosen et al 2005), to violence in teenage relationships (Barter, 2007) and in domestic elder abuse (Lowenstein & Ron, 1999). Bullying has also been linked to envy of the target’s competence or social skills (van Heugten, 2010).

There is some evidence that some perpetrator seek retribution through acts of abuse and/or see their actions as vigilante type behaviour (i.e. that they are righting a wrong) or even a form of punishment for perceived ‘bad behaviour’. Evidence exists in research into street crime that violence served as a means of exacting ‘informal justice’ (Bennett & Brookman, 2009). Violence was a way of retaliating against a perceived injustice (Hamberger et al 1997). A study that asked convicted sexual assaulters about their motivation found that the most common motivation was a generalised hostility towards others and a desire to retaliate through harming either specific individuals or anyone convenient (Beech et al 2006). Similarly a study into women who used violence in their domestic relationship found that retribution for harm they had suffered was cited as a motivation (Swan & Snow, 2003). Motivations of retaliation were also linked to women who had suffered previous harm or were retaliating in a dual violence situation where retaliation was closely aligned to self-defence (Flemke & Allen, 2008; Kernsmith, 2005; Rosen et al 2005). Even a seemingly very different area, that of cruelty to animals, appeared to be influenced by retaliation motives (Hensley & Tallichet, 2005).

There is some evidence that perpetrator can act out of prejudice. For example, hate crime appears to be motivated out of prejudice against members of a recognisable group, such as people with learning disabilities (Perry, 2004). However this prejudice can occur even within care services with the challenging behaviour exhibited by some people with learning disabilities or other ‘problem’ behaviours in the care receiver being cited as a rationale for the behaviour of the perpetrator (Compton et al 1997). Finally the idea that perpetrators play down their behaviour and see it as more like good humoured rough and tumble was supported by a study into abuse and violence in teenage relationships who sometimes described their actions as ‘being playful’ (Barter, 2007).

**Personal characteristics and life experience of perpetrator**

The final theme within the perpetrator category relates to personal characteristics or previous experiences of the perpetrator. This is perhaps the most difficult aspect of motivation to research given that it is difficult to find evidence for these aspects and there is a high reliance on perpetrator self-report or theorising.

Researchers often question whether gender differences occur in reasons for violence and some support for this is found in adult violence (Hamberger et al 1997; Kernsmith, 2002). Also in teenage relationships violence for girls was related to self-defence, anger, jealousy and in boys to play, control, and to prevent escalation (Barter, 2007). These matters are not only of theoretical interest but have important implications for prevention and treatment. Because of differences in gender motivations interventions that have been designed to treat violence (usually based on male models of partner violence that emphasise power and control) may not be effective for many women (Kernsmith, 2005; Swan et al 2008) who are more likely to be motivated by self-defence and fear (Swan et al 2008). If different types of violence exist not only between genders but within genders we need different interventions to prevent these different types of violence continuing (Rosen et al 2005).

One theory about violent behaviour is that perpetrators lacked an emotionally close relationship in early childhood or had a poor attachment with a primary caregiver. The idea that clues to a perpetrator’s behaviour could lie in their early childhood experiences has become popular. Yet it was difficult to find research studies that tested out this idea. Two notable exceptions were research with couples where there was domestic violence (Allison et al 2008; Rogers et al 2005). Rogers et al drew
on an early idea by the developmental psychologist John Bowlby that family violence was the result of a failure to develop a secure attachment with a primary caregiver (usually the mother). The resultant ‘insecure attachment’ can cause a range of difficulties to adult relationships (Simpson et al, 1996). Rogers et al’s (2005) study found that people with insecure attachments were more abusive than people with secure attachment styles. This is supportive of an earlier study that found that secure early attachments were poorly represented in a sample of known domestic abusers (Dutton et al 1994).

Allison et al’s (2008) looked at attachment patterns in the current relationship and found two strategies used by perpetrators to regulate their physical and emotional distance within relationships. Violence was used to enforce these strategies.

Another idea is that the perpetrator has some form of mental health problem. When carers have sacrificed their own futures to look after another their mental health may well suffer and abuse or neglect as a result (Beach et al 2005; Furness, 2006). “Structures interview data from 142 caregivers indicate that more depressed caregivers are more likely to treat their spouses in potentially harmful ways” (Williamson & Shaffer, 2001). Depressive symptoms can occur when caring for elderly relatives with dementia (Gallagher-Thompson, 2003) and in elder abuse in general (Kivela, 1995). Untreated mental health issues were found in a study of fathers killing their families (Johnson, 2006). Swan & Snow (2006) argue for the need to understand women’s use of violence in context means considering the role of anxiety, depression and post-traumatic stress disorder in their behaviour.

In terms of more severe aspects of mental health according to Homer & Gilleard (1990: 1361) “physical abuse is perpetrated by people with disturbed or disorganised personalities”. A study by Ross & Babcock (2009) while not examining prevalence of personality disorders amongst violent offenders took as its starting point that personality disorder is an etiological factor in some perpetrators’ violence. It was not a determinant, however, as they found a wide range of triggers and motives that acted as determiners in whether violence occurred. The most severe of mental health problems such as psychopathic disorders may be linked to women’s violence against strangers as opposed to the more complex motivations involved in relational violence (Weizmann-Henelius et al 2003). Less dramatically but more commonly, several studies suggest that a mental health / stress reaction plays a part, for example, this was cited as mitigation by 17% of the alleged perpetrators in the Hussein et al (2009a) study.

While a relationship between perpetrator substance use and violence is widely supported, studies differ on both the strength and nature of the relationship. For example whether it is biological or socially learnt (Jewkes, 2002; Swan & Snow, 2006) or as studies from outside the UK suggest that there could be a cultural dimension in the extent to which alcohol is a contributory factor. Authors of a study into domestic violence in Russia suggest that the relationship between violence and alcohol may be very important, with the rates of consumption being among the highest in the world (Lysova & Douglas, 2008). Finnish research found a close connection between elder abuse and use of alcohol by the family carer (Kivela, 1995). Other studies merely cite alcohol consumption by the perpetrator as a risk or contributory factor (Homer & Gilleard, 1990; Rhatigan et al 2005; Weizmann-Henelius et al 2003) or the availability of alcohol and drugs as contextual factors in youth violence (Reppucci et al 1999). Some studies do not find a statistically significant relationship. For example, a study with female perpetrators found no correlation between abusive behaviour and alcohol use (Lewis et al 2002). Similarly a study on factors associated with abuse conducted with carers of elderly people with dementia found that levels of alcohol consumption by the carer were not associated with elder abuse (Compton et al, 1997).

Insecurity, low self-esteem or a lack of fulfilment all can play a part in shaping a perpetrator. For example factors that can play a role in turning carer stress into abuse – include carers’ low self-
Esteem (Institute on Aging, 2002). Research with female perpetrators suggests a relationship with low self-esteem (Lewis et al. 2002). Insecurity about status or competence may be a factor in the behaviour of bullies (van Heugten, 2010). Committing abusive acts can be used by the insecure as a means of seeking attention, in which case violence becomes a non-verbal means of expression (Hamberger et al 1997). A study by Allison et al (2008) found two motivations for abuse that related to the psychological needs of the perpetrator. One of these, described as a ‘pursuit strategy’, involved violence being used to force one partner to focus on the other.

The idea that people who abuse have been abused in their own pasts has become part of popular culture. Many researchers have noted that violence is a learned social behaviour for some – sometimes referred to as an ‘inter-generational cycle of violence’ (Haaken, 2008). Lindhorst & Tajima (2008) in their review of survey research on domestic violence note the growing literature on how historical trauma exerts influence on later generations. For example, when violence is seen as the norm in a family it can relate to increased likelihood of youth violence or that violence between adults in certain settings is acceptable (Jewkes, 2002; Reppucci et al 1999). A similar link between different forms of violence is shown by a study of female perpetrators suggested a high incidence of witnessing domestic violence between their parents (Lewis et al, 2002). This appears to give support to the idea that violence becomes in some way a normalised choice when dealing with difficult situations or feelings. The problem can then be that the perpetrator who goes on to abuse does not even judge their behaviour to be abusive (Selwood & Cooper, 2009). Perpetrators appear able to justify their actions as either being unintentional (cited by 24% of the alleged perpetrators in the Hussein et al 2009a study) or as resulting in little harm (cited by 44% as mitigation in the same study).

A study by Swan and Snow (2003) into women who are perpetrators of domestic violence found a high prevalence of childhood abuse, especially child sexual abuse. In some cases this normalised behaviour may also have a retaliative element. For example, a report into elder abuse on behalf of the Law and Justice Foundation cited the example of where a person abused as a child by a parent becomes the parent’s abuser when the child grows up to be an adult carer of the elderly parent (Ellison et al 2004). These ideas about the influence of upbringing are controversial in some quarters as they may be seen to excuse the power / control aspects of violence and the fact that the perpetrators still has choices about how they act (Haaken, 2008).

Other aspects of a perpetrator’s past can be significant and a popular idea is that a violent or aggressive personality exists where incidents of violence can be mapped across the years, perhaps starting with a juvenile history of criminality (Weizmann-Henelius et al 2003). An interesting study with 261 inmates found a high incidence of cruelty to animals during their childhood and adolescence (Hensley & Tallichet, 2005). They identify several common motivations that they suggest could be used to inform early intervention programmes to reduce violence escalation and to find better ways of coping.

The fact that violence has some function and that is actually a form of negative coping strategy appears in several pieces of research (e.g. Perez-Rojo et al 2008; Reppucci et al 1999). One such study by Ross & Babcock (2009) suggests a motivation of feelings of intense anger that the perpetrator finds difficult to control and therefore lashes out in order to try to regulate negative emotions. Similarly, Kivela (1995) cites Finnish research showing how family members solved problems by being violent to an elderly relative.

Self-reports by perpetrators on why incidents occurred indicates that some perpetrators of domestic violence see their violence as a way of resolving conflict as it re-asserts their control over a person and/or situation (Rosen et al 2005; Ross & Babcock, 2009). Similarly unhelpful coping strategies used by carers of people with dementia have been linked to abuse (Selwood & Cooper, 2009). The idea that a
lack of verbal confidence, or in the case of some vulnerable adults an inability to communicate verbally at all, resulting in violence as a form of communication has become an idea in popular culture. This idea gets some support in research by Rosen et al (2005) that suggests that some people explain their violence as a way of communicating with their partner – described in this paper as an ‘instrumental motivation’.

This instrumental motivation also applies to the idea that perpetrators are quick to anger and have an irresistible need to express this anger. Anger as motivation for girls’ violence in teenage relationships (Barter, 2007) violence as method of expressing anger (Hamberger et al 1997; Rosen et al 2005). The idea of a heightened emotional state as a pre-cursor to abusive behaviour is cited in several studies – described in a study by Flemke & Allen (2008: 66) as “feeling completely overwhelmed emotionally” and the need to enact out of emotion (Ross & Babcock, 2009).

Another facet of proactive motivation is a selfish desire to fulfil their own needs in a self absorbed way that does not consider the needs of others. Ideas of self-importance and viewing women merely as sexual objects and not autonomous beings came out in a self-report study of motivations of men who sexually assaulted women (Beech et al 2006). A study into men who kill their families before committing suicide cites ego-centricity and the holding of propriety views of wife and children (Johnson, 2006). It is perhaps obvious that people must get something out of their perpetrating behaviour in order to engage in it. However, surprisingly little is written about the gratification motivation behind perpetrating although Hensely & Tallichet (2005) cite that it can be fun for some, while Langan & Means, (1996) and Ross & Babcock, (2009) talk of how perpetrators can manipulate for personal gain. Motivations for engaging in street crime include achieving status, honour and to experience a buzz (Bennett & Brookman, 2009). Yet it is hard to determine what differentiates someone who is determined to achieve this gain from somebody who is not.

There is some debate about whether cognitive impairment or low levels of education are more prominent amongst perpetrators. Research into risk factors amongst care givers suggests that risks are increased if care givers have a cognitive impairment (Beach et al 2005). There is little empirical evidence on the level of ability or attainment and likelihood of abuse. However, domestic violence research by Hotaling & Sugarman (1986) suggested that men with a lower level of education tended to more abusive and that with women with low levels of education are more likely to be the victim of abuse. One specific example of how a low level of education could result in unintentional elder abuse is where a family member is managing the finances of the older person but is finding it too complex thereby leading to financial abuse (Langan & Means, 1996). Similarly ignorance could lead to problems such as inappropriate use of medication. Reppucci et al (1999) drawing on a wide range of sources cites low socio-economic status, poverty and lack of opportunity as contextual factors in youth violence. “For the affluent, the home is a place of calm refuge from competitive striving; for the oppressed, home is where spirits are revived and often this takes the form of aggressive outbursts. When work involves self-monitoring and submission to hierarchical control, home is the one place where self-control may be more safely suspended” (Haaken, 2008: 86).

Society and environment
Consideration of wider sociological thinking on the impact of society on violence and violence on society is beyond the scope of this review. However, the basic idea that violence is not merely something that is an inter-personal construct but that it has a broader societal dimension may have relevance to how society views the abuse of vulnerable adults. An article by Michalski (2004) makes a few interesting points. First that the use of violence is perpetuated within some contexts but becomes socially unacceptable in others. Second that biological, psychological and structural factors may all
play a part in determining violent behaviour. Third that factors such as gender differences regarding violence are inextricably linked to societal attitudes.

A practical example of how societal attitudes may shape the response to violence is given by Kivela (1995) who considers the impact of society viewing the elderly as ‘non-persons’ as significant in a tolerance of elder abuse. This clearly has a cultural dimension and there is some evidence in the literature that cultural norms influence the level of tolerance towards violence. For example in a study into violence in the relationships of Russian students the authors suggest that domestic violence is a real social problem in Russia and that there is a high level of normative violence and social disorganisation (Lysova & Douglas, 2008). Within Western society it is not uncommon for the media to be cited as contributing to how violence is portrayed and ultimately sanctioned (Reppucci et al 1999). A study by Neighbors et al (2010) showed that perpetrators appeared to see their behaviour as more prevalent than was actually the case suggesting that normalising the behaviour as common in society could act as a form of defence. 124 men who had committed domestic violence were asked to assess their own behaviour and to estimate how common those behaviours were amongst other men. Results showed that they consistently overestimated the percentage of men who engaged in acts of domestic violence.

A common theme in the literature is how certain environments and cultures can provide a breeding ground for abuse. Another key paper is White et al’s (2003) systematic review into the significance of environments and cultures that promote abuse. A systematic review is an important source as it provides a critical and thorough evaluation of relevant research in the field. Diverse aspects are outlined by the review that offering insight into the processes by which services may deteriorate and abuse become established and therefore the review is referred to at several points in this section.

A survey into the effects of care setting on abuse (Page et al 2009) suggests that higher rates of abuse and neglect in nursing homes may relate to poor staff to resident ratios and high staff turnover. In a study aimed at developing competencies to prevent mistreatment in nursing homes DeHart et al (2009) noted the organisational competencies required including adequate staffing. Similarly problems with staffing was cited as mitigation by 10% of the alleged perpetrators in the Hussein et al (2009a) study. There are other ways that staff can experience their working conditions as ‘unsatisfactory’ and this term was cited as mitigation by 13% of the alleged staff perpetrators in Hussein et al (2009a) study. Low salaries, low levels of job satisfaction and understaffing are all associated with elder abuse (Ansello & O’Neill, 2010). It is not only the perceptions of staff that these conditions are unsatisfactory that matters; it is also where the conditions of the service, its design and how placements for people are planned that increases service users vulnerability to abuse – all factors reported in the White et al (2003) study.

A poor working environment can contribute to staff feeling a lack of motivation to perform their caring role well. While not being the only motivational carrot money can be one form of motivation (or de-motivator) especially in the care sector where pay is low. Pring’s (2005) analysis of the lessons that could be learnt from the Longcare abuse suggests that better pay might encourage care staff to develop their careers and qualification and improve their motivation. Similarly Martin (1984) in his book on lessons from many years of abuse inquiries cites the problem of low staff morale whereby staff do not feel that they can grow and develop in their role. There is a problem when staff feel both undervalued and lack autonomy. Empowering direct care staff to believe they have a valuable contribution to make and that their views matter could be seen as generally a good thing. DeHart et al’s (2009) study goes further and suggests that a cooperative work environment is part of the competency framework to prevent elder mistreatment. They argue that this includes helping direct care staff to value the centrality of their role to the provision of a high quality service.
There are various forms of isolation that seem to be linked to abuse. First, organisational isolation and a distant management were identified in White et al’s (2003) key aspects of working environments that promote abuse and this is supported by others for example, Aylett (2008). Second, where services become isolated from others and there is a lack of joined up care (Ellison et al, 2004). Third, where a perpetrator is isolated and so can continue to abuse unchallenged (Sobsey, 1994). Isolation can become particularly problematic when a culture of control is allowed to reign unchecked. A mis-use of power that defines the organisational climate is an aspect of the environment that can promote abuse according to the review by White et al (2003).

An interesting question is to whether certain forms of abuse are more prevalent in some settings than other. An analysis of adult protection referrals in two English local authorities found a clear association between location and type of abuse (Mansell et al 2009). A survey (Page et al 2009) on the effect of care settings on elder abuse found variations in amount and type of abuse. Contexts where care is provided in peoples’ own homes and assisted living nursing homes have the highest rates of all types of abuse, although paid home care has a relatively high rate of verbal abuse and assisted living has an (unexpected) high rate of neglect. Moving from paid home care to a nursing home is shown to more than triple the odds of neglect. An analysis of ex-care staff appearing on the POVA list in England and Wales found that a relationship between their previous place of work and the types of abuse engaged in (Hussein et al 2009b). For example, financial abuse less likely in care homes while physical abuse was more likely in care homes.

**Lack of support**

Another theme in the literature is where a lack of support can lead to problems for people working or caring informally for vulnerable people. Ideas about failings amongst senior staff in terms of lack of management, supervision and leadership, thus enabling abuse to take place is widespread in the literature (Brown, 2007; DeHart et al 2009; Martin, 1984; Selwood & Cooper, 2009). In White et al’s (2003) systematic review, management and the deployment and support of staff emerged as key factors of environments that promote abuse. Martin (1984) in his book dedicated to unpicking the lessons of the large abuse inquiries suggests that these management failings fall into two main types. First that adequate standards have been neglected and therefore no modelling of good practice is provided. Second that senior staff are themselves corrupt and are responsible for or (or collude in) misdeeds.

One of the responsibilities of management is to ensure that staff are trained not only in doing their jobs to a high standard but also in an understanding of abuse and malpractice (Selwood & Cooper, 2009). Inadequate training was cited by 19% of the alleged perpetrators in the Hussein et al (2009a) study. Similarly White et al’s (2003) study cited lack of training as one of the seven aspects of culture that promote vulnerability to abuse. Pring (2005) in an examination of how abuse at Longcare remained unreported for so long suggests that a lack of training results in poor standards being the norm and new staff do not learn to do things differently.

Stress and burden of caring is widely identified and is referred to throughout the literature (e.g. Kivela, 1995; Perez-Rojo, et al 2008; Selwood & Cooper, 2009). A research report by the National Center on Elder Abuse in the US focuses on carers who become perpetrators as a result of the stress of being a carer. Interestingly while acknowledging many of the factors that cause widespread stress, they also attempt to identify the factors that differentiate why some carers become perpetrators and some do not (Institute on Aging, 2002). Similarly, in conducting research with elderly carers Morbey (2002) found

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5 Homes where both nursing and personal care is provided
that a quality relationship between carer and caregiver could help lesson the impact of the stress of caring. While not dealing with motivation to abuse directly, the systematic literature review undertaken by Quinn et al (2009) cites how depression in caregivers can link to maltreatment of patients and subsequently the importance of promoting carer wellbeing.

Although carer stress is commonly cited as a risk factor for potential maltreatment by carers (Compton et al. 1997; Jewkes, 2002) although a report by Ellison et al. (2004) states that carer stress is less influential as a risk factor for abuse than previously thought. They suggest a more complex pattern of determinants and mediating factors. Similarly Homer & Gillear’s (1990: 1361) research challenges the stereotype of an abuser as a “well meaning daughter driven to breakdown by the stress of caring”. Yet there is no definitive answer on the extent to which carer stress plays a part with Chambers et al. (2001) suggest that family stress should be considered when analysing the abuse of someone by a family member.

Of course not all caring roles are the same and abuse by family carers was found by some to be more likely when there are high care needs (Beach et al. 2005) — higher prevalence of abuse in care settings may be linked to higher needs of residents due to serious levels of physical or cognitive impairment (Page et al. 2009). Interestingly, a study with perpetrators who were also family carers of people with dementia suggested that improvements to the health of their family member would reduce the likelihood of abuse. Asked about the top interventions to prevent abuse, medication to help the care recipients’ memory came in the top three most popular answers (Selwood et al. 2009). Conversely the interview study with caregivers undertaken by Williamson & Shaffer (2001) found that the risk of harmful behaviours was not influenced by higher care demands. However findings such as these must be considered in the context of the limitations of self-report data. It is likely that some motivations are seen as more socially acceptable (e.g. carer burden) while others (e.g. feelings of repulsion at dealing with a family members double incontinence) may be seen as shaming and therefore may not be disclosed.

Interventions to reduce carer isolation such as advice / support from professionals and the provision of home care, respite and sitting services were all deemed important by perpetrators who were family carers (Selwood et al. 2009). A study of perpetrators who were also family carers of people with dementia found that the availability of residential respite was an important intervention in reducing abuse by family carers (Selwood et al. 2009). Perception of support being available seems to be as important as whether help is actually taken up (Compton et al. 1997). A study to identify competencies to prevent mistreatment of the elderly in care homes stated that it is essential to “identify strategies for offering or requesting assistance from co-workers when conflicts or heavy workloads pose risk of maltreatment.” (DeHart et al 2009: 375) It may be that neglect is a particular risk in this context given it arises from an omission of care rather than commission (Stevenson, 2008). The study by the Institute on Aging (2002) suggests that positive patterns of coping, problem-solving skills and access to social support can limit the likelihood of carer stress turning into abuse. Sometimes the support required is not relief from caring but practical and specific advice to improve a sense of competence in the caring role. A study with perpetrators who were also family carers of people with dementia found that written advice on how they could better understand the memory problems of their family carer was seen by participants as an intervention that could help to prevent abuse (Selwood et al. 2009).

An unusual explanation for abuse came up in a study of alleged perpetrators in mental health and learning disability services. One interviewee recalled a resident making four or five allegations daily each having to be referred to adult protection services and taking up so much time other residents’ care suffered (Rees & Manthorpe, 2009). There appears to be an implication being that in fulfilling their
adult protection responsibilities they had less time to dedicate to care and that this could be construed as being neglectful.

*Problems within relationships*
Pre-existing difficulties in the relationship between perpetrator and victim have been found to be a factor in some violent or abusive situations. This is especially true in research into domestic violence. For example, Houry et al’s (2008) study of female and male perpetrators found that many had also been the victim of domestic violence within the same relationship. Other studies into elder abuse found that a poor pre-morbid relationship was one of the factors significantly associated with abuse (Compton et al 1997; Homer & Gilleard, 1990). However certain forms of abuse appear more linked to a poor pre-abuse relationship such as verbal abuse and neglect (Homer & Gilleard, 1990).

Fortunately the reverse appears also to be the case whereby a quality past relationship between the caregiver and care receiver appears to mitigate the chance of carer stress resulting in elder abuse or domestic violence (Institute on Aging, 2002; Morbey, 2002; Williamson & Shaffer, 2001).

Studies with perpetrators often cite some level of provocation that resulted in their actions or even violence from the person who ends up becoming the victim (Barter, 2007; Ross & Babcock, 2009). Given the strong evidence on systemic abuse within families or across generations it is perhaps unsurprising that the idea that abuse may be interactive i.e. a carer receives abuse from the care receiver and then becomes a perpetrator themselves. A study by Paveza et al (1992) suggests this was a relatively recent idea but the theme of verbal or physical abuse caused by the care receiver is referred to in several studies (Compton et al 1997; Homer & Gilleard, 1990; Selwood & Cooper, 2009). Unfortunately this area has not received enough attention to assess what motivations lay behind this abuse. However, Paveza et al (1992) suggests that the stress of living with a chronic condition like dementia can causes changes in the family structure that could in some cases lead to violence.

Abuse received by someone who then goes on to perpetrate need not be violent. A perpetrator being on the receiving end of racial taunts from care home residents was cited as a factor in elder mistreatment in a research study by DeHart et al (2009). Prejudice and racial abuse was also cited by 4% of the alleged perpetrators in the Hussein et al (2009a) study. Staff perpetrators can themselves also be victimized by other staff members with staff victimisation cited by 9% of the alleged perpetrators in the Hussein et al (2009a) study. Bullying or threatening behaviour directed at staff is sometimes cited as a reason why staff have not blown the whistle on abuse. For example, in the Longcare abuse scandal humiliation by staff became a norm where daily abuse could pass without anyone reporting it or even taking part in the regime in order to avoid being further abused themselves (Pring, 2005).

*Summary*
Violence is a complex social phenomena which is influenced by an interlinked multiplicity of factors. As Martin (1984: 241) concludes in his review of the early abuse inquiries “failures of care result from long chains of interconnected events” – while acknowledging the pervading ideas about “bad apples” he believes this to be over-simplistic. This view is not unique to adult protection and a more sophisticated consideration of systemic determinants is called upon in fields as diverse as workplace bullying (Lutgen-Sandvik & McDermott, 2008). Curiously what these diverse fields share is a lack of focus on how the phenomena come into being and persists:
“It is also essential to look beyond individualistic “bad-apple” explanations to understand the phenomenon’s complexity but, to date, little scholarship has done so. Indeed there is insufficient theorizing about the phenomenon. Rather, research focuses on prevalence, impacts, target-bully characteristics and more recently potential interventions” (Lutgen-Sandvik & McDermott, 2008: 305)

White et al (2003) go further in suggesting that an over-emphasis on the ‘bad-apple’ may lead to protection strategies that focus merely on staff screening and police checking.

“More often there will be other decaying apples, the barrel itself may be leaking and contaminated with the spores of decay, while the fruit farmer is hasty and slapdash” (Martin, 1984: 242)

This study will take forward the ideas presented in this literature review: power and control; problematic attitudes; personal characteristics and life experience of perpetrator; the impact of society and care environments; lack of support for carers and problems within relationships.
Findings – Phase 2 - Survey

The online survey was completed by 34 people with a 50% gender split. Due to the relatively small sample size and breadth of issues covered in the survey some analysis did not result in any discernible patterns in the data. Therefore the findings that are presented here are those that can contribute to answering each of the five original questions. Question 1 was ‘what is the evidence to support the existence of ‘reactive’ and ‘proactive’ perpetrators.’

Analysis of the categories provides support for the existence of the proactive, reactive, and ‘other’ dimension. Category means, standard deviations, and Cronbach’s alpha coefficients for the categories used in part 2 of the survey can be found in Table 8. Internal consistency coefficients (Cronbach alphas) ranged from .84 to .94, indicating appropriate levels of reliability (Pallant, 2005). With a mid-point of 78 and a mean of 62.24, results suggest that respondents tended to agree with the statements in support of a reactive profile. Similarly, with a mid-point of 123 and a mean of 99.32, respondent tended to agree with the statements in support of a proactive profile. As can be seen, bivariate correlation between the scales was high, but not high enough to warrant multicollinearity (Tabachnick & Fidell, 2001). A correlation of .71 (p < .01) between the reactive and proactive categories justifies keeping the constructs separate ($r^2 = .50$).

Table 8: Means, standard deviation, reliabilities and intercorrelations reactive, proactive, and other motivations

<table>
<thead>
<tr>
<th>Scale</th>
<th>N</th>
<th>Range</th>
<th>Mid point</th>
<th>Mean</th>
<th>SD</th>
<th>$\alpha$</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Reactive</td>
<td>26</td>
<td>26-130</td>
<td>78</td>
<td>62.24</td>
<td>15.07</td>
<td>.93</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Proactive</td>
<td>41</td>
<td>41-205</td>
<td>123</td>
<td>99.32</td>
<td>18.63</td>
<td>.94</td>
<td>.71**</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>3. Other</td>
<td>4</td>
<td>4-20</td>
<td>12</td>
<td>9.06</td>
<td>3.39</td>
<td>.84</td>
<td>.75**</td>
<td>.76**</td>
<td>1</td>
</tr>
</tbody>
</table>

* p < .05; ** p < .01.

Note: Results must be interpreted with caution due to the small sample size.

The survey asked to what extent participants agreed with the working definition of a ‘reactive abuser’. As can be seen in Table 9, most respondents (70% agreed or strongly agreed n=24/34) with the reactive abuser definition, with four having no view and six disagreeing with the definition. A between employer comparison suggests that this pattern of response is similar across employers.

Similarly, the majority of respondents (76%) agreed or strongly agreed with the working definition of a ‘proactive abuser’ (n=26/34), with three having no view and five either disagreeing or strongly disagreeing with the definition. Again, a between employer comparison suggests that this pattern of response is similar across employers.
Table 9: Level of agreement with the definitions of reactive and proactive abuser

<table>
<thead>
<tr>
<th></th>
<th>Reactive</th>
<th>Proactive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly agree</td>
<td>9</td>
<td>12</td>
</tr>
<tr>
<td>Agree</td>
<td>15</td>
<td>14</td>
</tr>
<tr>
<td>No view</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>Disagree</td>
<td>6</td>
<td>2</td>
</tr>
<tr>
<td>Strongly disagree</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Total</td>
<td>34</td>
<td>34</td>
</tr>
</tbody>
</table>

Participants were asked to give reasons for their answer. There was a certain amount of understanding and by some even compassion in relation to the reactive abuser:

**There will be times when a carer feels totally frustrated and commits an isolated abusive action, but in these cases the perpetrator is probably as much a victim as the victim. Each case needs to be dealt with sensitively.**

This is the ‘vulnerable type abuser’ as I would call them as they are under such stresses that their personality and education level cannot cope they have little or no support and they become this type of abuser.

**Being a reactive abuser is not an excuse for abuse but may help to explain the circumstances in which a basically decent person can become an abuser.**

How reactive motivations develop and what can be done to address them was also commented on:

**Reactive abuse may happen not only as a result of individual experiences and responses but from the development of a collective culture, typically within services but not solely, where abusive practices and attitudes develop and where individual members of staff or carers become incorporated into this culture (or are repelled and leave).**

This is linked to poor cultures in care homes and hospitals as well as lack of support for family carers. This is just as unacceptable but could be resolved through better support, training and supervision, a radical cultural change to the way vulnerable adults are perceived (sic) and cared for. There also needs to be far more information and support for informal carers.

In relation to the proactive abuser some people felt there was a low prevalence:

**Thankfully this type of abuser is less prevalent.**

The idea of pre-mediated abuse, to the extent of seeking out contact in order to abuse, is a feature in the sexual exploitation of children but hardly ever of the physical abuse or neglect of vulnerable adults. Lots of people apparently get a 'kick' out of CSA (child sexual abuse) - but only a few psychopaths would ‘get a kick’ out of physically abusing vulnerable adults.

Interestingly several of the comments on the proactive abuser related to the challenges faced in recognising and avoiding placing these people in positions with vulnerable adults:
It is difficult to recognise this during the interview process as they can appear to come across as knowledgeable and enthusiastic.

CRB checks and rigorous selection processes should reduce the number of people slipping through the net but it's never 100% bad apples will still try to find a way into work in health and social care.

Sometimes more difficult to spot as valued work colleague/volunteer who is helpful and 'nice'.

The third research question asked ‘to what extent can an understanding of motivations to commit generic violent crimes inform our understanding of motivation to abuse vulnerable adults’. Here the picture is more complicated. Part 2 of the survey was developed from the review of literature into motivation to commit a range of violent offences. However the survey analysis showed that there was little universal agreement as to which factors are most important in understanding why someone may abuse a vulnerable adult. The replies were diverse between and within different employers, reflecting the complexity of the constructs and the different hypotheses adult protection professionals develop to help them understand why abuse happens. Yet some factors were cited repeatedly and relate to the attitudes of perpetrators, desire for power and control and the need for support for carers.

In addition to selecting their top 5 factors from the 71 listed in part 2, participants were asked at the start of the survey to list up to 3 factors that they believed were important in understanding why someone may abuse a vulnerable adult. It was important that this question occurred at the start of the online survey in order that responses were not influenced by factors put forward in later questions.

On the whole most responses were similar to the motivations in part 2 (that emerged from the literature) with power /control, stress, opportunism, gain / greed and poor attitudes all figuring strongly.

Other slightly different motivations included:

- Low risk of complaint being made by the vulnerable adult
- Disabled people thought of as different / dehumanised and not a ‘normal’ person
- Lack of understanding of dignity and respect / lack of personal values and integrity

Despite some commonality a complex picture emerges of how adult protection investigators interpret motivations to abuse. An in-depth inspection of the responses was necessary to attempt to make sense of the data in part 2.

To begin with, the proactive category contained many items that required respondents to consider whether perpetrator motivations may be linked to their background and/or characteristics. In such instances, all but two replies* fell largely in the ‘I have no view’ category. Two categories with strong levels of agreement also had high levels of ‘I have no view’ – given that both of these relate to mental health (perpetrator has mental health / personality disorder) it is likely that while a reasonable proportion appear to have these problems that some respondents who stated ‘I have no view’ would be unaware (see Table 10).
Table 10: Respondents’ reply to the perpetrator characteristics items of the proactive category

<table>
<thead>
<tr>
<th>Perpetrator characteristic</th>
<th>Agree</th>
<th>Disagree</th>
<th>No view</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perpetrator has mental health problems</td>
<td>15 (44%)</td>
<td>7 (21%)</td>
<td>12 (35%)</td>
</tr>
<tr>
<td>Perpetrator has personality disorder</td>
<td>16 (47%)</td>
<td>3 (9%)</td>
<td>15 (44%)</td>
</tr>
<tr>
<td>Perpetrator abuses substances</td>
<td>13 (38%)</td>
<td>6 (18%)</td>
<td>15 (44%)</td>
</tr>
<tr>
<td>Perpetrator lacks an emotionally close relationship in childhood</td>
<td>13 (38%)</td>
<td>9 (26%)</td>
<td>17 (50%)</td>
</tr>
<tr>
<td>Perpetrator is quick to anger</td>
<td>27 (79%)</td>
<td>3 (9%)</td>
<td>4 (12%)</td>
</tr>
<tr>
<td>Perpetrator is self-absorbed, puts own needs first or could be described as ego-centric</td>
<td>28 (82%)</td>
<td>1 (3%)</td>
<td>5 (15%)</td>
</tr>
<tr>
<td>Perpetrator has a criminal history as a juvenile</td>
<td>4 (12%)</td>
<td>11 (32%)</td>
<td>19 (56%)</td>
</tr>
<tr>
<td>Perpetrator feels jealous of vulnerable adult in some way</td>
<td>10 (30%)</td>
<td>9 (26%)</td>
<td>15 (44%)</td>
</tr>
<tr>
<td>Perpetrator abuses substances</td>
<td>13 (38%)</td>
<td>6 (18%)</td>
<td>14 (44%)</td>
</tr>
<tr>
<td>Perpetrator uses abuse as a method to stop a situation escalating</td>
<td>13 (38%)</td>
<td>7 (21%)</td>
<td>14 (41%)</td>
</tr>
<tr>
<td>Perpetrator fears being left/abandonment by the vulnerable adult</td>
<td>10 (29.5%)</td>
<td>10 (29.5%)</td>
<td>14 (41%)</td>
</tr>
<tr>
<td>Perpetrator feels obsession towards the vulnerable adult</td>
<td>10 (29.5%)</td>
<td>10 (29.5%)</td>
<td>13 (38%)</td>
</tr>
<tr>
<td>Perpetrator seeks retribution through acts of abuse</td>
<td>16 (47%)</td>
<td>6 (18%)</td>
<td>12 (35%)</td>
</tr>
</tbody>
</table>

Of the exceptions (listed as * above) it strengthens support for the existence of the proactive abuser category that the idea of abuse emerging from anger (79% agreement) and / or an ego-centric position (82% agreement) were strongly agreed with. Other aspects of proactive motivation with strong levels of agreement include those that relate to power / control, perpetrators mental state and environment elements (see Tables 11, 12 and 13).

Table 11: Items with the highest level of agreement in the proactive category linked with perpetrators’ desire to control

<table>
<thead>
<tr>
<th>Item</th>
<th>Agree</th>
<th>Disagree</th>
<th>No view</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perpetrator wants to control vulnerable adult</td>
<td>33 (97%)</td>
<td>1 (3%)</td>
<td>0</td>
</tr>
<tr>
<td>Perpetrator is in a position of power over the vulnerable adult</td>
<td>33 (97%)</td>
<td>1 (3%)</td>
<td>0</td>
</tr>
<tr>
<td>Perpetrator sees vulnerable adult as easy targets/weaker than themselves</td>
<td>33 (97%)</td>
<td>0</td>
<td>1 (3%)</td>
</tr>
<tr>
<td>Perpetrator has a desire for authority over vulnerable adult</td>
<td>31 (91%)</td>
<td>1 (3%)</td>
<td>2 (6%)</td>
</tr>
<tr>
<td>Perpetrator has a desire to belittle vulnerable adult</td>
<td>28 (82%)</td>
<td>4 (12%)</td>
<td>2 (6%)</td>
</tr>
<tr>
<td>Perpetrator has a desire to oppress vulnerable adult</td>
<td>27 (79%)</td>
<td>2 (6%)</td>
<td>5 (15%)</td>
</tr>
<tr>
<td>Perpetrator has a desire to restrict freedom/choices for vulnerable adult</td>
<td>25 (74%)</td>
<td>2 (6%)</td>
<td>7 (21%)</td>
</tr>
<tr>
<td>Perpetrator has aggressive personality</td>
<td>20 (59%)</td>
<td>6 (18%)</td>
<td>8 (23%)</td>
</tr>
</tbody>
</table>
Table 12: Items with the highest level of agreement in the proactive category linked with perpetrators’ mental state

<table>
<thead>
<tr>
<th></th>
<th>Agree</th>
<th>Disagree</th>
<th>No view</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perpetrator has low self–esteem</td>
<td>23 (68%)</td>
<td>3 (9%)</td>
<td>8 (23%)</td>
</tr>
<tr>
<td>Perpetrator has feelings of insecurity</td>
<td>21 (62%)</td>
<td>1 (3%)</td>
<td>12 (35%)</td>
</tr>
</tbody>
</table>

Table 13: Items with the highest level of agreement in the proactive category linked with an environment suited to a proactive abuser

<table>
<thead>
<tr>
<th></th>
<th>Agree</th>
<th>Disagree</th>
<th>No view</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff working environment is not conducive to staff development</td>
<td>20 (59%)</td>
<td>6 (18%)</td>
<td>8 (23%)</td>
</tr>
<tr>
<td>Perpetrator feels isolated in caring role</td>
<td>25 (75%)</td>
<td>7 (20%)</td>
<td>2 (5%)</td>
</tr>
<tr>
<td>When perpetrator is also a vulnerable adult an inability to resolve problems verbally may lead to abuse</td>
<td>28 (82%)</td>
<td>1 (3%)</td>
<td>5 (15%)</td>
</tr>
<tr>
<td>Perpetrator finds vulnerable adults’ challenging behaviour difficult</td>
<td>30 (88%)</td>
<td>1 (3%)</td>
<td>3 (9%)</td>
</tr>
</tbody>
</table>

In the reactive category, the highest levels of agreement were on the items related to carer burden (Table 14) and to working conditions (Table 15).

Table 14: Items with the highest level of agreement on the reactive category linked with carer burden

<table>
<thead>
<tr>
<th></th>
<th>Agree</th>
<th>Disagree</th>
<th>No view</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perpetrator feels high levels of stress</td>
<td>29 (85%)</td>
<td>3 (9%)</td>
<td>2 (6%)</td>
</tr>
<tr>
<td>Perpetrator has lack of respite from caring role</td>
<td>26 (76%)</td>
<td>5 (15%)</td>
<td>3 (9%)</td>
</tr>
<tr>
<td>Perpetrator feels the burden of being a carer</td>
<td>25 (74%)</td>
<td>1 (3%)</td>
<td>8 (24%)</td>
</tr>
<tr>
<td>Perpetrator is overwhelmed by high care needs of vulnerable adult</td>
<td>30 (88%)</td>
<td>1 (3%)</td>
<td>3 (9%)</td>
</tr>
<tr>
<td>Perpetrator uses negative coping strategies to relieve tension</td>
<td>33 (97%)</td>
<td>0</td>
<td>1 (3%)</td>
</tr>
<tr>
<td>Perpetrator feels incompetent at caring tasks</td>
<td>19 (56%)</td>
<td>7 (21%)</td>
<td>8 (24%)</td>
</tr>
<tr>
<td>Perpetrator lacks an ability to cope with problems / challenges</td>
<td>27 (79%)</td>
<td>5 (15%)</td>
<td>2 (6%)</td>
</tr>
<tr>
<td>Perpetrator feels powerless / unable to make a difference</td>
<td>16 (47%)</td>
<td>8 (23%)</td>
<td>10 (30%)</td>
</tr>
</tbody>
</table>
Table 15: Items with the highest level of agreement on the reactive category linked with working conditions

<table>
<thead>
<tr>
<th>Item</th>
<th>Agree</th>
<th>Disagree</th>
<th>No view</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understaffing</td>
<td>28 (82%)</td>
<td>2 (6%)</td>
<td>4 (12%)</td>
</tr>
<tr>
<td>Staff find working conditions unsatisfactory</td>
<td>18 (53%)</td>
<td>3 (9%)</td>
<td>13 (38%)</td>
</tr>
<tr>
<td>Staff lack adequate training</td>
<td>24 (71%)</td>
<td>5 (15%)</td>
<td>5 (15%)</td>
</tr>
<tr>
<td>Old, institutionalised attitudes influence staff’s current behaviour</td>
<td>26 (76%)</td>
<td>2 (6%)</td>
<td>6 (18%)</td>
</tr>
<tr>
<td>Staff lack adequate management/supervision/leadership</td>
<td>31 (91%)</td>
<td>1 (3%)</td>
<td>2 (6%)</td>
</tr>
<tr>
<td>Staff feel undervalued in role</td>
<td>24 (71%)</td>
<td>3 (9%)</td>
<td>7 (21%)</td>
</tr>
<tr>
<td>Staff have no autonomy in role</td>
<td>18 (53%)</td>
<td>3 (9%)</td>
<td>13 (38%)</td>
</tr>
<tr>
<td>Staff feeling victimised / bullied by other workers or managers</td>
<td>18 (53%)</td>
<td>7 (21%)</td>
<td>9 (26%)</td>
</tr>
<tr>
<td>Staff member feeling isolated within their organisation</td>
<td>21 (21%)</td>
<td>6 (18%)</td>
<td>7 (21%)</td>
</tr>
<tr>
<td>Perpetrator experiences violence from the vulnerable adult</td>
<td>20 (59%)</td>
<td>5 (15%)</td>
<td>9 (26%)</td>
</tr>
<tr>
<td>Staff work in an organisation that is isolated from other services</td>
<td>20 (59%)</td>
<td>7 (20.5%)</td>
<td>7 (20.5%)</td>
</tr>
</tbody>
</table>

The second research question asked ‘what other (not reactive or proactive) explanations exist for potential perpetrator motivation?’ Several ideas emerged from the literature review that were classed as ‘other’ and were included in part 2 of the survey. Several of these ‘other’ factors showed strong levels of agreement. These other factors are presented in table 16 alongside an item from the proactive category. They have been grouped together here as they show high levels of agreement with the idea that the perpetrator’s attitude towards abuse is a significant factor in their abuse. The high levels of agreement suggest that intra-personal factors may influence motivation to abuse.

Table 16: Scores on the items reflecting perpetrators’ attitudes as to what constitutes abuse

<table>
<thead>
<tr>
<th>Item</th>
<th>Agree</th>
<th>Disagree</th>
<th>No view</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perpetrator does not judge abusive behaviour as abnormal</td>
<td>27 (79%)</td>
<td>5 (15%)</td>
<td>2 (6%)</td>
</tr>
<tr>
<td>Perpetrator does not see behaviour as abusive</td>
<td>28 (82%)</td>
<td>4 (12%)</td>
<td>2 (6%)</td>
</tr>
<tr>
<td>Perpetrator has high tolerance of what constitutes abuse (i.e., does not see actions as abusive)</td>
<td>29 (85%)</td>
<td>3 (9%)</td>
<td>2 (6%)</td>
</tr>
<tr>
<td>Perpetrator has attitudes/beliefs that condone abuse</td>
<td>24 (71%)</td>
<td>0</td>
<td>10 (29%)</td>
</tr>
<tr>
<td>Perpetrator sees behaviour as being playful / good natured</td>
<td>14 (41%)</td>
<td>13 (38%)</td>
<td>7 (21%)</td>
</tr>
</tbody>
</table>
Also contributing to addressing research question 2 (what other explanations exist for potential perpetrator motivation) was part 4 of the survey which asked participants to rate the extent to which they agreed or disagreed with relevant themes from the literature (see Table 17). While not motivations in themselves these ideas contribute to making sense of motivation.

Table 17: Levels of agreement with common themes from literature

<table>
<thead>
<tr>
<th></th>
<th>Agree</th>
<th>Disagree</th>
<th>No view</th>
</tr>
</thead>
<tbody>
<tr>
<td>Different types of perpetrator (e.g. staff, family carer, friends) abuse for different reasons</td>
<td>28 (82%)</td>
<td>4 (12%)</td>
<td>2 (6%)</td>
</tr>
<tr>
<td>Different settings result in different forms of abuse</td>
<td>28 (82%)</td>
<td>6 (18%)</td>
<td>0</td>
</tr>
<tr>
<td>Different forms of abuse (e.g. physical, verbal) have different motivations</td>
<td>23 (68%)</td>
<td>9 (27%)</td>
<td>2 (6%)</td>
</tr>
<tr>
<td>There are gender differences in reasons why people abuse vulnerable adults</td>
<td>17 (50%)</td>
<td>10 (29%)</td>
<td>7 (21%)</td>
</tr>
<tr>
<td>Perpetrators tend to have suffered abuse themselves at some point in their life</td>
<td>11 (32%)</td>
<td>13 (38%)</td>
<td>10 (29%)</td>
</tr>
</tbody>
</table>

High levels of agreement were found for the idea that differences in perpetrator type and type of abuse are related to differences in motivation. The setting in which a potential perpetrator finds themselves also appears to be important in the type of abuse that could result. The picture with gender is more mixed as is opinions on whether perpetrators tend to have suffered abuse in the past. A significant minority also do not have a view on this which links to a wider issue about the high number of ‘I have no view’ responses to some of the factors presented in part two of the survey. This implies that much of this information about perpetrators and their motivations is not collected by (or known to) the people who investigate abuse allegations.

Do health/social care staff differ in their ideas from law enforcers?

It was stated earlier that overall there is agreement across employer categories on the existence of proactive and reactive categories of motivation. However given the diversity in views on which of the 71 items were most significant in contributing to the abuse of vulnerable adults the decision was taken to look more closely at the working roles of respondents to see if a pattern emerged. The hypothesis here was that people working in health, social care or independent settings may have a more holistic knowledge of the context of abuse, of the victim and the perpetrator prior to the abuse taking place. In contrast it was hypothesised that the police would have a perspective that was more focussed on the specifics of the abuse itself and would not have any wider knowledge of context, victim or perpetrator. Therefore it was possible that these health/social care/independent staff would have different perspectives on potential motivations to ‘law enforcers’.
In order to examine this idea the data had to be re-grouped to form a new category (n=23) – which included responses from health, social care and the independent sector (who are service providers) and is referred to in the text as HSI staff. The respondents who stated they worked in higher education or training roles were not included in this analysis as it was not possible to ascertain whether their work experience would involve – or had involved – direct experience in health or social care. Results for this new category could now be compared with the results for the police respondents (n=6). These results appear to support the idea that the wider contextual knowledge held by HSI staff influences their thinking on why abuse occurs. For example, over half of HSI staff (57%) considers that the perpetrator could themselves be a victim of abuse from the vulnerable adult, showing recognition of the relational context of abuse. Not surprisingly given that their first contact with the perpetrator would be during an investigation the police either disagree or have no view on this factor (83%) indicating that they would not be so aware of contextual factors. While these differences are of interest the sample is too small to say that they are representative.

The survey concluded with an invitation to make any additional comments regarding perpetrator motivation:

“Clearly different motivations when we are talking about emotional abuse, violent abuse, financial exploitation and neglect. The motivational patterns for these are very different”

“Completing the survey serves to highlight the complexity of abuse and abuser.”
Findings – Phase 3 - Case Studies and Expert Focus Group

The survey output led to the development of an interview schedule for more depth analysis of motivations in specific cases. A wide range of ideas about motivation were elicited and while support for proactive and reactive ideas was found additional motivations emerged. In addition many participants provided an insight into the experience of conducting an adult protection investigation and the challenges they face in working with perpetrators. Their experiences are important in considering how practitioners can maximise their chance of understanding motivation.

The qualitative analysis is structured around the following super-ordinate themes of context setting, proactive abuse, reactive abuse, personal and relational ideas and adult protection investigations (see Table 18). Verbatim quotes (in italics) are given for illustrative purposes and reference made to their source.

Table 18: Super- and sub-ordinate themes from qualitative analysis

<table>
<thead>
<tr>
<th>Context Setting</th>
<th>Proactive</th>
<th>Reactive</th>
<th>Personal &amp; Relational</th>
<th>Adult protection investigations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where abuse occurs</td>
<td>Repeat offending /escalation</td>
<td>Carer stress / burden</td>
<td>Relationship complexity</td>
<td>Perpetrator may not give a full account</td>
</tr>
<tr>
<td>Complex perpetrators</td>
<td>Manipulates environment in order to abuse</td>
<td>Lack of training / supervision</td>
<td>Historical context</td>
<td>Qualification and experience of adult protection practitioners</td>
</tr>
<tr>
<td>Motivations shift over time</td>
<td>Gatrekeeping</td>
<td>Lack of governance</td>
<td>Perpetrator does not judge action as abusive</td>
<td>Pressure on practitioners</td>
</tr>
<tr>
<td></td>
<td>System isolation</td>
<td>Mental health / substance abuse</td>
<td>Mutual mistrust of services</td>
<td>Lack of focus on ‘why’ in the adult protection process</td>
</tr>
<tr>
<td></td>
<td>Perpetrator deflects blame</td>
<td>Cultural / organisational norm</td>
<td>Means of expressing emotion</td>
<td>Struggle to understand the ‘why’ of abuse</td>
</tr>
<tr>
<td></td>
<td>Gain / gratification / greed</td>
<td></td>
<td></td>
<td>Need for ‘why’ when relationship ongoing</td>
</tr>
<tr>
<td></td>
<td>Power / control</td>
<td></td>
<td></td>
<td>Need to engage when relationship ongoing</td>
</tr>
<tr>
<td></td>
<td>Opportunistic</td>
<td></td>
<td></td>
<td>Blinkering of perception of perpetrator</td>
</tr>
<tr>
<td></td>
<td>‘Bad apple’</td>
<td></td>
<td></td>
<td>Victim focussed</td>
</tr>
<tr>
<td></td>
<td>Bullying of the weaker</td>
<td></td>
<td></td>
<td>Knowledge of perpetrator can prevent future abuse</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Lack of perpetrator interviews</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Motivation shifts over time</td>
</tr>
</tbody>
</table>

Adult protection is broader than process
Using creative approaches in adult protection
Need for legislation
Compromised outcomes
CONTEXT SETTING

These themes cover two issues which influence how adult protection practitioners think about motivation.

Where abuse occurs – this theme relates to all references on the significance of the location of abuse in determining whether abuse occurred or how the setting could contribute to facilitating that abuse happened.

*It had to be behind closed doors where he could threaten his parents ‘if you tell anything about this’ and then he would keep them locked in the house or do further damage to them and injury to them. So I think it played a significant part, this happened always indoors.* (CS4)

The Expert Focus Group also suggested that where the abuse occurred would shape the investigation. “*There may be different sorts of questions asked depending on the situation of the incident and therefore how you set your terms of reference for the investigation.*” It was also felt that there could be more control exerted over a care context but that situations in someone’s own homes especially where they have decision making capacity present the largest challenges. Challenges occur both in terms of understanding what is going on (which links to the relational motivations mentioned later) and in trying to bring about change.

Complex perpetrators – several people referred to cases that they described as particularly complex, often this was due to complexity in the history of the perpetrator, the relationship between the perpetrator and the victim or the fact that the perpetrator was a vulnerable adult. Understanding the motivations of these perpetrators was seen as particularly difficult, incredibly time consuming and posed particular challenges in engaging with them in the adult protection process.

*If it had been a staff member it could have been more simple in terms of what you needed to do.* (CS6)

*We would have removed them, it’s as simple as that.* (CS1A)

*Because the complex relationship they had made it more difficult to sort of get to and also it made our actions ….more complex but they had to be, whereas had it been a staff member think that would have been relatively clear cut.* (CS4)

*When the perpetrator is also a vulnerable adult it appears that it can be more difficult to fully understand motivations.* (CS5)

With some perpetrators who are themselves vulnerable adults it may be difficult to determine motivation due to cognitive impairments - for example someone with advanced dementia who has become quite violent but who before the onset of dementia was very gentle and anti violence. Can motivation be identified in such instances or is the behaviour simply the result of the illness? This is not to condone violence but rather to argue that in some instances the individual does not appear ‘motivated’ to act in an abusive way but rather that it is part of their condition or the fact that others are not able to respond in a manner which they find supportive.

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6 The CS number refers to case study source
7 Two interviews were conducted with staff involved in the investigation of case study 1 referred to as CS1A and CS1B
Motivations shift over time – when abuse remains unchallenged (by the victim or others) it can become an integral part of the relationship – a one off becomes an ongoing pattern of abuse that the perpetrator inflicts upon their victim. So for example a person who originally abused for reactive reasons becomes more proactive when abuse continues.

Well I think in the first instance they may have thought ‘well hang on I need a couple of hundred quid I’ll take it out’ but having done that then perhaps they turned into the bad apple and thought ‘look I got away with this once I’ll go and do it a second, third and possibly a fourth time’. (CS2)

The abuse is thus ‘reactive’ in the sense that the individual is responding to the situation in which they find themselves. This can then develop into proactive abuse. This suggests there is a continuum in some circumstances from one type of abuse to another. (CS4)

There are clearly some individuals who target vulnerable people but on the whole there are likely to be underlying factors that have led them to this situation. For example family members with financial difficulties may seek to inherit ahead of time. (CS2)

**PROACTIVE ABUSE**

These themes cover aspects of motivation that fit with a more proactive position. Several members of the Expert Focus Group suggested that understanding the true motivations behind purposeful abuse was particularly difficult and that work in this area is the most challenging that practitioners undertake.

**Repeat offending /escalation** – most of the case studies discussed had involved several incidents or had related to previous episodes of abusive behaviour. Often the severity of these incidents escalated over time. Also covered by this theme were references to practitioners’ sense of powerlessness to prevent further abuse.

*I think the level of increase from voyeurism to then physically threatening somebody to say you know “I want you to strip so that I can see you naked” to getting angry when people frustrate him. You can see there’s a mark up each time.* (CS5)

*You realise how little you can do to stop things forever – especially when there are things going back years and they have got away with it and yes we have dealt with the current incident and tried to prevent things happening again but when the victim has capacity you can sometimes see that things could go that way again.* (CS1B)

**Manipulated environment in order to abuse** – proactive perpetrators frequently appear to manipulate the location, systems and people around them in order to both isolate the individual and encourage a dependence on their input.

*And there was some suggestion that he may have been disposing of medication because he didn’t believe it was effective.* (CS6)

They (the perpetrators) do more and more and more and more until they’ve actually come to a point where the person themselves cannot live without the alleged perpetrator. They’re so reliant on them for everything. The control has gone then, hasn’t it? Completely shifted. (CS1B)
I think it’s significant to some extent that it was at home because its her home, nobody else was going to come because nobody ever did visit apart from the health service district nurses: he would know when they were coming. (CS1A)

Gatekeeping – sometimes this manipulation takes the form of gatekeeping. This is a specific way that control can be maintained by the perpetrator who stands between the vulnerable adult and the outside world. This has the dual effect of limiting the involvement of services and increasing dependence of the vulnerable adult on the perpetrator.

His attitude towards domiciliary care workers was “you don’t need to come here” or he’d try and change the times of the calls. (CS6)

it was possible to control the flow of external agencies, you know he had the key and until we got involved he’d remained in control of that so there had been issues about people being let in. He had acted literally and metaphorically as “the gatekeeper”. (CS1)

System isolation – the end result of the manipulation of the environment and gatekeeping (discussed above) is that the individual and system becomes isolated from external influence / scrutiny. But it can also occur when a system (for example a family or care home) for a variety of reasons does not access external services and therefore appear closed to outside influence.

When I’m asking questions about: so what governance did you have to make sure staff were able to say and express their concerns? It’s just in the hands of this one person. There were no meetings set up with the manager. The manager in fact wasn’t even supervised. (CS2)

They were very rarely allowed out. The only time they were allowed out was occasionally when he took them to hospitals or whatever appointments, or he did go out most of the evenings between 9 and 10 and they weren’t allowed out of the house at that particular time, but they were allowed, or people phoned them, they knew when to phone when he wasn’t there. So they could try and raise help, as this gentleman did, their friend. (CS4)

He wouldn’t call the GP because you know, she didn’t need a GP, he was looking after her. He was described as having sabotaged all care packages by being verbally abusive to the carers. (CS6)

Perpetrator deflects blame – a defence strategy used by the perpetrator in the face of evidence of abuse can be to blame other people – it is likely for some this is a conscious manipulation and for others it is a genuine belief that others are (at least in part) responsible for the situation. Most often this is seen with family perpetrators who either complain about the lack of support they receive as carers from services or the treatment their family member receives from services

More often then not allegations become like a counter-transference so “this is not my fault, this is your fault”…..”How dare you make allegations about me! I’ve seen you managing my mother and you don’t deal with her in this way, you should deal with her in this way!” So whenever tackled on allegations of abuse it’s always down to somebody else’s responsibility rather than his own. (CS6)
But sometimes even staff perpetrators deflect responsibility onto others within the service such as in this case where a manager was guilty of neglect through not providing the equipment required to the vulnerable adults in her care.(CS3)

I’d been told to control the budget so that’s what I’m going to do by not giving you stuff even though I’ve got it there .(CS3)

**Gain / gratification / greed** – most case studies appeared to have an element of gain whether this was a sexual gratification, financial gain or other beneficial outcome for the perpetrator from committing the abuse.

In terms of the motivation...yeah, I think it was a motivation out of greed and perhaps desperation, that someone needed money that badly that they would take this opportunity. Because not only were they taking money off the individual with the learning disability, they were also being dishonest with their own parents and taking advantage of their own parents in this situation.(CS2)

Clearly he was getting something out of it – he got a kick.(CS1A)

**Power / control** – power appears to be a factor in most if not all cases. Sometimes the power differential had been a feature of their relationship prior to abuse, sometimes there were examples of inappropriate use of power for many years prior to the actual incident or the seeking of power over the vulnerable adult appeared to be the key reason for the abuse.

He was like the King of his own house, whatever he wanted they had to do and if they didn’t do it then he would abuse them. He would threaten them and he would use violence of any means at all……... and the motivations were “that you had to do because I told you to do it”.(CS4)

We came across three cases in relation to the same alleged perpetrator where access to services were denied and treatment refused. Colleagues were feeling uncomfortable with doing what she was telling them to do. And she (the perpetrator) was the manager of those staff.(CS3)

**Opportunistic** – this theme has been used for any references to the perpetrator seizing upon a situation and turning it to his advantage. The fact that an incident occurs in an opportunistic way does not mean that the perpetrator was not premeditated and could follow a period of preparation (e.g. manipulating the environment, gatekeeping and isolating the vulnerable adult)

So in terms of the reasons this occurred I would say it was opportunistic and it was theft of someone’s money because the situation lended itself to him ....I believe he probably thought he would be able to get away with it at least in the short term and perhaps if the situation had continued, perhaps even in the longer term.(CS2)

If he put himself in the situation, situations would present themselves.(CS5)
“Bad apple” - this phrase came directly from our original proposal and was mentioned in the literature (Manthorpe & Stanley, 1999; Martin, 1984). It has come to epitomize the idea of the proactive perpetrator.

He was like a bad apple...he just wanted to go out and commit these abuses whether the opportunity arose or not. (CS3)

Bullying of the weaker – many of the victims of perpetrators had additional vulnerabilities that served to heighten their vulnerability and could be seen by perpetrators to be weaker than themselves.

This man’s a coward and a bully in my own personal opinion. He can only do it to his elderly, frail parents who are very, very sick. (CS4)

**REACTIVE ABUSE**

These themes cover aspects of the reactive category where circumstances increase the likelihood of abuse taking place (even though in themselves they would not be a determinant of abuse)

**Carer stress / burden** – a core part of our original reactive perpetrator definition was the idea of a carer being overly stressed and unable to cope.

So often things like stress or lack of training or not really understanding their role properly or being put in a position where there’s too much asked of them really beyond their ability. (CS4)

An individual who in this case was a carer who wasn’t coping. (CS1B)

He did provide some caring functions for her including some quite personal stuff and there were issues around what support could have been offered. (CS6)

The Expert Focus Group concurred with the commonality of this aspect of motivation but equally that it can be difficult when help is not taken up

You have tried to work with them (the family) and they don’t want to know and now it’s ended up as a POVA

**Lack of training / supervision** – another idea in popular culture is that people are lacking adequate training / awareness raising or supervision of their work. There was widespread support for this in the case studies.

There were no meetings set up with the manager. The manager in fact wasn’t even supervised. (CS3)

One participant suggested an innovative strategy for improving awareness as part of abuse prevention
The importance for education to highlight the topic of abuse - in schools and at an early age - the issue of power and control of one person over another - producing unequal relationships. (CS5)

Lack of governance – several practitioners made reference to a lack of clinical governance / poor systems or management or inspectorate shortfalls

When I’m asking questions about: so what governance did you have to make sure staff were able to say and express their concerns? It’s just in the hands of this one person. (CS3)

What emerges from this is the lack of governance and I think they’ve now recognized the lack of governance. (CS2)

With hindsight there were not enough checks and balances in place. (CS1B)

Mental health / substance abuse - few cases reported definitive evidence of mental health problems or substance abuse issues on the part of the perpetrator but several practitioners speculated that they may have contributed in some way to the actions of some perpetrators:

Some of them will come and say they didn’t realise what they were doing because of drink and drugs. (CS4)

I’ve met him several times before but at that juncture, I started to feel that we were dealing with a man possibly Aspergic you know. I did really feel that this guy had got problems of his own and most probably I would say had indicators of Aspergers. (CS6)

A member of the Expert Focus Group made reference to national cases where some form of Munchausen’s by proxy in paid worker and a local case where chronology work showed a long history of low level behaviour that was below the radar for prosecution and so Munchausen’s by proxy had been hypothesised

Cultural / organisational norm– this theme strays into the area of institutional abuse whereby the abuse is normalised within a culture that condones behaviour that would not have been acceptable elsewhere. What is perceived and normal and what breeches the threshold for abuse can differ even within a single service. One member of the Expert Focus Group recalled

Behaviours I saw where carers were being controlling or manipulative over that person was seen by someone else with professional experience as being usual with this client group. So there are even issues even about our own professional understanding about what is appropriate or inappropriate behaviour. (CS3)

Interestingly the pattern of systemic norms occurs within a family just as much as within an organisation

So I think neglect, there is something different in people’s eyes about neglect. That they can be so close to the situation that they don’t see it….They don’t see the mess they’re living in, they don’t see it with the fresh eyes of somebody like ourselves going in and saying “Whoa! Look at the state of this!”(CS1B)
Others will say that they saw it (violence) they were part of domestic abuse when they were children and they thought it was the norm.(CS4)

PERSONAL AND RELATIONAL

This is a new super-ordinate theme that covers aspects of perpetrator motivation that reflect how a perpetrator thinks about themselves, and themselves in relation to other people.

Relationship complexity – complex relationships can exist between the perpetrator and victim and the clues to perpetrator motivation can lie within this complexity. Most practitioners emphasised the influence of the relationship on abuse

So our impression were his motives for what he was doing was something else to do with his relationship with the person.....and the relationship was clearly an important one.(CS6)

One of the issues for us was that without that relationship she (the victim) might have been physically better but there would have been this emotional loss for her.(CS1B)

When initially confronted with the idea that her hands might have been bound we would have been into a very sort of clear case of proactive abuse, somebody who intentionally seeking to harm. It fairly rapidly became clear that it was more complex than that.(CS1A)

We don’t know the issues around relationships. We don’t know the relationship with his father whose not even talked about. We don’t know the issues to do with his relationship with his mother when she was well.(CS6)

Particular challenges are faced when the victim has capacity and while they do not like the actions of a family member they do not wish to take things further and risk losing the relationship. This can be very frustrating for practitioners when the family appear to ‘close rank’ limiting the potential for improvements.

Historical context – often a relationship pre-dates the allegation being investigated by some considerable time. Sometimes practitioners will have knowledge of the nature of this relationship but sometimes they will just be aware that a history exists and they are left to speculate on the degree to which this history influenced current abuse

Until you have got some of this wider understanding of what is the nature of the relationship, what’s about that person, you can’t really begin to get the full understanding of their motivations.(CS6)

And we don’t know his upbringing as a child or with his siblings.(CS6)

There’s a missing link in that sense and I think the link is the background history.(CS1A)

Sometimes it can be very difficult for practitioners to unravel the history, or to engage at any level with perpetrators or victims who see outside influence as interference.
Perpetrator does not judge actions as abusive – in some cases perpetrators seem ignorant regarding the abusive nature of their actions. This appears to be particularly common where abuse is an act of omission when the perpetrator seems unaware that the omission constitutes an abuse. For example, a son or daughter using the elderly person’s money which they see as their inheritance

He is a simple man who wouldn’t know how to dress a leg, wouldn’t know the importance of taking medication, therefore he needs some help, needs some support.(CS1B)

If he had been left alone all would have been well. There was no abuse. He caused no harm.(CS6)

Interestingly one member of the Expert Focus Group reported on some work in her area where adult protection professionals were addressing low level neglect in learning disability services by working in a more assertive way with families regarding substandard care.

Perhaps in the old days the POVA process would have been going on around the family and they wouldn’t even know about the POVA process because no one has even felt they were able to be assertive and upfront and transparent and to say ‘we feel the care you provide or don’t provide or the fact that you keep missing all of these hospital appointments is neglectful and its harming or potentially harming the vulnerable adult’

There was a general sense that more needs to be done by services to help to limit a defence of ignorance by family members caring for vulnerable adults.

Mutual mistrust of services – several cases appeared to show a mistrust of services on the part of both the vulnerable adult and perpetrator. This may be due to active gatekeeping on the part of the perpetrator or may be the result of historical breakdowns in the relationship with services.

It transpired that this person (the vulnerable adult) had a dislike of Health Services or didn’t trust then and didn’t see them as effective.(CS1A)

But then you’ve got two people that would be very, very reluctant for social services to come in because they were obviously of the opinion that social services were interfering busybodies.(CS4)

It did start to ..balance up slightly, where she (the victim) was controlling him (perpetrator). Yes, he was the mouthpiece but she’d said “I don’t want the cleaners in!” or “I don’t want them in!” And then he would say “You’re not coming in because she doesn’t want you in”.(CS1A)

Means of expressing emotion – there is some evidence to suggest that abuse has been used by some perpetrators as a means of expressing their emotions (often feelings of anger or frustration) and that in this way it could be used as a means of communication, albeit a negative one.

She didn’t see him for a number of months but eventually, when I believe he went on an anger management course or whatever, whether he completed that or not, I’m not quite sure?(CS6)

His view is that he deserves that gratification..he thinks he deserves it and he gets angry and frustrated if people prevent him from doing so.(CS5)
ADULT PROTECTION INVESTIGATIONS

These themes cover the interface between perpetrator motivation and the adult protection investigation.

Perpetrator may not give a full account – questions on perpetrator accounts elicited some concerns about the accuracy of what the perpetrator says.

"They may not give you the whole truth but they’ll certainly give an indication “well these are the circumstances that led me to this.”(CS3)

A member of the Expert Focus Group felt that while an account of motivations from the perpetrator may be helpful

That some perpetrators may not be able to express it, may not be articulate or may not know truly in order to be able to express it to us as to why they are motivated to behave in that way.....we may only get half the picture

To obtain the perpetrators account, the Expert Focus Group also emphasised the importance of training and in particular the Joint Investigation Training which teaches the importance of asking open questions such as “tell me, explain to me, describe to me”. The approach conveys interest in the perpetrators account. However this training is not yet undertaken by Adult Protection Investigators in all welsh counties.

Qualification and experience of adult protection practitioners – the extent to which practitioners would examine motivation and the methods they would use to do this, appeared to vary and was at least in part linked to their training and experience not only as practitioners but as clinicians

When you look at the Adult Protection referral it just says ‘background’ it doesn’t give me a forensic outline or any issues that might apply to now. So unless you’ve got that element and expertise most people just follow process.(CS5)

If you’ve not dealt therapeutically with issues you’re not picking those up necessarily.(CS6)

Not all Adult Protection Coordinators are professionally qualified and that’s a question you know I’ve had in my head as to how then do they pick up these issues?(CS5)

With staff perpetrators the disciplinary process could pick up important insights into motivation that could inform practice but a lack of training could impede this

What did emerge is the interviews weren’t done particularly well and staff came back to say “Well nobody told me I had to explore this?” And somebody else, even in HR “Well I’ve never dealt with Adult Protection before.” And what I did pick up was a range of learning lessons, that’s what came from this, as if you’re going down disciplinary, you need to have the skills to deal with whatever the issue is.(CS3)

Pressure on practitioners – some practitioners reported the stress experienced in conducting investigations as well as how long they took.
And I think one of the interesting points of this case is something that does emerge in Child Protection and is not, I don’t think, fully recognised in Adult Protection, the stress it causes for those investigating. (CS3)

I think if you looked at any of our cases, the long term cases, then it is very evident that it takes too long. (CS1A)

**Lack of focus on ‘why’ in the adult protection process** – some practitioners felt that the need to determine if abuse happened and to plan remedial activity. This overshadowed a focus on why or how abuse was able to take place. Some practitioners felt that the priority was often on short term safety but this was clearly not getting to the root of the problem given the high number of repeat referrals.

People focus on what we need to do now without asking the more fundamental questions about how did we get to this situation. (CS5)

Yet there seems a discrepancy between what currently happens and the ‘vision’ of practitioners where, understanding why abuse happens is key in stopping abuse happening again and therefore reducing the amount of abuse going on overall.

When the Expert Focus Group discussed to what degree why abuse happened was discussed by investigating team it was suggested that

What questions were asked would depend on the training of the investigative officer and how open they would be to looking at what happened in the first place

Another focus group member said

How far you go with the how and why questions depends on the experience of the DLM who is chairing the meeting in terms of facilitating that discussion and perhaps how assertive the persons are who come to the table. So if you have the right sort of people are the meeting who are thinking and challenging and helping the discussion to go forward then those sort of questions perhaps come up more readily. The benefits of a really good multi agency discussion are really important here.

But others defended the focus on did abuse happen and any remedial action that needs to happen as there is often a pressure to ensure safety of the vulnerable adult in the short term. Another focus group member explained

Our focus is to find out about the abuse, find out what happened and what can we do to protect this person and others.

**Struggle to understand the ‘why’ of abuse** – when practitioners do try to find out why and how abuse was able to happen they can face considerable difficulties.

In terms of understanding a motivation I think that’s something we need to maybe be more explicit about. It’s there, I think you know as you can see in this case, but I don’t think its in the checklist of things to consider it isn’t one of the key things to actually identify why has this person done this? In the process you hope people will get to it so I think it is about giving it greater prominence – that would be helpful. (CS1A)
It’s difficult to know what the motivator is you know.(CS2)

It’s these issues about how we actually manage the process in terms of understanding the perpetrator more fully because that would effect what sort of safeguards we will put in place.(CS1A)

Some Expert Focus Group members were concerned that a worry of being seen as overly intrusive when working with provider agencies could cause a reticence in practitioners to probe too deeply into the ‘why’ of abuse.

I have certainly had conversations with some in adult protection who say it’s not our job to get into saying this organisation does not do proper training, proper supervision, that is not really part of the investigation process. A point of view I do not share.

One Expert Focus Group member cautioned that if you do not do this you end up with a ‘firefighting’ approach with vulnerable adults feeling that

You dealt with that episode but actually it’s my whole life and this stuff was happening again and again and again and people weren’t getting at the roots of it

Need for why when relationship ongoing – some practitioners acknowledged a particular need to understand why the abuse occurred when the perpetrator was going to have ongoing contact with the victim (for example, if they were members of the same family)

Until you have got some understanding of the nature of the relationship, what going on with that person you can’t really begin to get the full understanding of their motivation.(CS6)

How we understand the full range of what a perpetrator is....the action the perpetrator may be doing. From that obviously getting to the motivation you can see that’s going to be complex. If we have a clearer and more comprehensive understanding then we can do things to protect the person and it may well be things that go more in accordance with their wishes.(CS1A)

An understanding of why abuse happens can be the first step in looking at how a family can move forward from a situation into an abuse free future

Because not only were they taking money off the individual with the learning disability, they were also being dishonest with their own parents and taking advantage of their own parents in this situation.(CS2).

Need to engage when relationship ongoing – similar to the theme above when the investigation team are considering measures to maintain the victim’s safety in the longer term they may want to engage the perpetrator as part of a protection plan.

I think we should have worked much harder to actually get him involved in the Adult Protection process in terms of actually interviewing him and taking him through that side of it. It’s an area where evidence in the local authority shows there are difficulties in cases where they are a relative so somebody has a caring personal relationship with somebody.(CS1A)
Again it’s about this whole work about understanding the perpetrator in a fuller way and really although I’ve been talking we want do more in terms of relatives. (CS1B)

There are a whole range of different issues in terms of how we effectively engage the perpetrators, if they (the vulnerable adult) wants to maintain the relationship and so on. We might be able to work more effectively with people who are alleged perpetrators. (CS4)

Yet while engagement with perpetrators is particularly crucial when they have an ongoing relationship with the victim this is also an area that is particularly difficult according to the Expert Focus Group. One member suggested

*There seems to be a reluctance when the perpetrator is a relative for that level of engagement. I think they (practitioners) are worried about damaging the relationship; in raising those sort of issues.*

Some practitioners also report family perpetrators filing complaints about practitioners or a fear of receiving complaints. Some practitioners worry that overly engaging with perpetrators could almost become therapeutic and that the investigation process may not be the time for this and the formality of the process would mitigate against a perpetrator sharing their true perspective. The advice given by members of the Expert Focus Group was that different workers engaged with different members of the family to avoid conflict of interests. There was unanimous agreement that engaging with perpetrators was a difficult task and that even when it was achieved the outcomes may not be ideal. But a member of the Expert Focus Group stated that

*Crises can be an opportunity to change so an adult protection referral can be an opportunity to challenge what has been going on till that point and look at the potential for positive change to happen*

**Blinkering of perception of perpetrator** - with hindsight some practitioners were able to see that perpetrators did not always get the support they needed, particularly if the nature of their caring role or the significance of their relationship with the vulnerable adult was over-looked

*But I wasn’t looking at him particularly as a carer. I was blinkered because I was actually seeing him as an abuser, as a perpetrator. (CS4)*

*He was introduced to me through documentation as the alleged perpetrator... Your opinion is already coloured I think and think that is perhaps something I need to be aware, mindful of. So when you’ve got all this evidence and he’s introduced on paper as the alleged perpetrator it’s very difficult for me to see him as a carer. (CS4)*

*The blinkers need to come off and for me not to just see an alleged perpetrator but see an individual who in this case was a carer who wasn’t coping. (CS1B)*

**Victim focussed** – one of the factors that could contribute to a lack of focus on why abuse occurs and engaging with perpetrators is that the investigation process has been predominantly concerned with the vulnerable adult victims
I think we should concentrate as well on alleged perpetrators. (CS4)

We were very focussed on the victim, very focussed on the prevention of harm and the issue is that we did not get a fuller picture of the perpetrator, their motivations, their life as would have been actually helpful to us. (CS6)

I think it’s getting this complete picture of the person that has to be the starting point. It’s from there you are going to try and get the possible different aspects of motivation because one of the things you can see. I think in this case, were potentially a number of different motivators for this individual so that would be helpful. (CS1A)

Knowledge of perpetrator can prevent future abuse – there was a widespread belief that understanding perpetrators and why they do what they do can have the potential to lead to better outcomes in terms of safeguarding vulnerable adults

If we can sort alleged perpetrators, if we can reduce their anxiety, their problems, their motivation, then abuse is going to drop. (CS5)

Some people felt that inter agency information sharing especially when someone is going through transition or moving between areas plays a part in making links between potentially disparate pieces of information

Sometimes you think ‘this must have gone on elsewhere’ but you don’t know and you can’t get the picture. (CS4)

When we looked into issues around the background of the alleged perpetrator we found there had been another case where this person had also performed a caring role but had again sort of seemed to restrict access to the person...We had issue with some of the accuracy of some of the records...the person who had raised the alert originally moved away and we weren’t able to contact them. (CS1)

Several practitioners felt that learning lessons from cases of staff perpetrators was often easier as they may well be quite keen to tell their story:

They are given an opportunity to explain their actions as far as possible which of course we need to take on board because there may be training needs or other issues that we’re not aware of but that as an organisation we need to be made aware of so we can minimise anything like that happening in the future. (CS6)

Lack of perpetrator interviews – unless there is a police investigation there is no requirement for perpetrators to consent to be interviewed. This can be frustrating when practitioners want to gain more understanding of why the perpetrator did what he did and can leave them feeling restricted in their investigative powers with regards to perpetrators

It’s about this whole work about understanding the perpetrator in a fuller way....understanding the full complexity of what was actually going on behind this. (CS5)

So again I think there were issues there for us about how thoroughly that process (meeting the perpetrator) was done and what was the right approach to doing that. We would have asked him to come to an interview with us and he didn’t arrive is my recollection. (CS1B)
Motivations shifts over time – when practitioners were engaged in trying to find out why abuse happened they sometimes reported shifts over time with new information changing their thinking.

So the ideas shifted from the idea originally that she had had her hands tied and there was some really quite severe stuff going on as well to a situation where it was much more around the issue of their relationship or issues about his understanding and so on. (CS1A)

And I had a theory about what was happening but that changed you know as I got to hear more and more background came out. (CS3)

Adult protection as broader than process – several practitioners felt that while a systematic process is a necessary and important part of adult protection that adult protection practice needs to go beyond the procedural and mechanistic. This is particularly the case when abuse turns out to be more serious and longstanding than originally thought and the thinking of the investigators shifts over time.

I don’t think people make the connection that Adult Protection is also about engaging therapeutically with somebody. I think they see it as a process – here’s an allegation, has it happened? If so this is what needs to happen. So again it’s too process driven. (CS3)

But as far as protective measures are concerned, if people have the soft intelligence...when it was appropriate on a need to know basis I think it would help in these cases because you know, we don’t know what was known about this chappy here. Clearly nothing on police record and yet you know when you spoke to members of the public or neighbours or things, you know there was certainly a lot of stuff around that gave some sort of insight in to him. (CS5)

Utilising creative approaches in adult protection – one way that some investigators go beyond adult protection as a procedure is to work flexibly with a range of techniques/services that can supplement their understanding of the situation (e.g. carers/domestic violence/ risk/forensic assessments or the use of soft intelligence).

I don’t think people pick up on the sort of therapeutic elements to it and the various ways you can deal with it. I think it happens but probably default as opposed to a very clear focus on why it is, what it is you’re doing and why you are trying to do it. (CS3)

I think the difference here was the forensic history assessment and risk assessment gave much more credence. (CS5)

Need for legislation – some practitioners commented on the ongoing problem of a lack of an over-arching legal framework to support adult protection, as exists in Scotland.

I feel like they’ve got in Scotland, I think...I honestly feel that we need some sort of legislation so like they’ve it’s the Vulnerable Adult Group Act or whatever in Scotland, where you can ban people from...who are abusing vulnerable people. You have got powers to enter and you’ve got powers to force them to leave. So I believe that when it comes to policy, it’s great having a policy and great having an all Wales policy since the end of last year, but I also feel that it needs some sort of legislation and a banning order. (CS4)
This was also a theme discussed by the Expert Focus Group.

When the police are not involved in cases i.e. where there is no allegation that a crime has taken place then the likelihood of hearing an account from the perpetrator is lessened and there is little social services can do about this

*He (the alleged perpetrator) was not formally interviewed as part of the process because he didn’t arrive for the interview.* (CS1A)

**Compromised outcomes** – several cases left the practitioners questioning what is meant by justice, to what level the outcomes were satisfactory and for whom

*I know he’s not a serial abuser he wasn’t going out but I don’t know he may well be into a relationship with somebody else and continue to be a bully and abuse people.* (CS1B)

*She went home albeit it wasn’t in condition that I would have a) wanted to live in or b) want to return to somebody to in an ideal world.* (CS6)

*I feel that she had been controlled by this gentleman and we were saying ‘this is inappropriate’. And we were then going to control and abuse her by placing her where she didn’t want to be and I felt it was wrong. I knew that she wanted to go home, she’d always wanted to go home and she’d never deviated from that.* (CS1B)

**Summary**

This qualitative analysis has demonstrated the strongly held views of professionals working in the field of adult protection. They are broadly supportive of the idea that reactive and proactive motivations exist and that additional personal and relational factors can contribute to motivations to abuse. In addition they have much to say about the adult protection process itself and the extent to which this process helps or hinders an understanding of motivation. There is widely held support for a greater focus on understanding why abuse occurs in order for professionals to have greater confidence that abuse will not recur due to a perpetrator merely moving their attentions onto another vulnerable adult.
Discussion

This section will consider the policy and practice implications of this study by reviewing answers to the original research questions. Specific recommendations will be made in the next section.

What is the evidence to support the existence of ‘reactive’ and ‘proactive’ perpetrators?

This study of experienced adult protection practitioners has supported the existence of ‘reactive’ and ‘proactive’ perpetrators. Several patterns emerged:

- **Single category motivation** - the case studies suggested that for some perpetrators their motivations fit more neatly into one category or another (e.g. the proactive perpetrator). However, it is likely that many cases are not this straightforward.

- **Complexity of multiple of factors within one category** – the desire to be reductionist and to find a single motivation to explain why abuse occurs is understandable but does not reflect real world complexity. Even if the motivation in a specific case can be mapped onto a single category it is likely that several motivations within this category would play a part. For example with a reactive perpetrator, a sense of incompetence at caring, high stress levels and a lack of access to respite care could combine resulting in abuse. While this complexity is acknowledged by practitioners it is not always accepted by researchers who can be overly reductionist in their quest for answers. This is a problem that is not unique to adult protection. According to Lindhorst & Tahima (2008) and Haaken (2008), research and theorising in the field of domestic violence lacks a focus on the complexity of contextual factors.

- **Motivation has personal and-relational aspects** – a key finding of this study is that motivations exist that do not appear to fit with the ‘reactive’ or ‘proactive’ category but appear to be linked to factors within the perpetrator themselves or how they relate to others. These can be internal to the perpetrator such as feelings of insecurity, or they can be within the relationship between the perpetrator and victim (e.g. a history of conflict).

- **Motivation shift over time** – in some cases motivation for an initial episode of abuse was different to motivation in subsequent episodes. For example, a staff member may steal money when going through a period of considerable home and work stress (reactive motivation) but, having realised how easy it is and having enjoyed the financial gain, has repeated this behaviour (proactive motivations) The idea of motivation shift over time is supported by the literature with DeHart et al (2009) describing how abuse can escalate from a reactive incident to something premeditated.

- **Motivation maps on to more than one category** – motivation is rarely straightforward and in many cases a complex set of motivations could be said to be involved in determining whether abuse takes place. For example (Brown 2007:4) suggests how poor management can have a role in both reactive and proactive categories of abuse

> “Individuals may be driven to abuse by a poorly managed environment, but a poorly managed environment also operates to condone and provide opportunities for an individual who came into the service with malicious or predatory intent.”

While the participants in this study gave widespread support for the initial proactive and reactive categories, some ideas from the literature received less support. It has therefore been necessary to amend the list of motivations (first presented in Table 2) by removing those that appeared to have less relevance to adult protection. Also the addition of the new ‘personal and relational’ category has meant that some motivations more appropriately fit into this category. While an attempt has been
made to re-categorise motivation these categories are not discreet and therefore the motivations listed may have a degree of overlap with other categories. However this is in keeping with practice where complex patterns of motivation within one perpetrator may map across more than one category (see Table 19 for revised list).

Table 19 – *New categorisation of motivations relevant to adult protection*

<table>
<thead>
<tr>
<th>Personal and Relational</th>
<th>Reactive</th>
<th>Proactive (‘bad apple’)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal characteristics of insecurity, aggression, low self-esteem.</td>
<td>Staff work in an organisation that is isolated / lacks adequate management / governance</td>
<td>Perpetrator manipulates environment / acts as gatekeeper / seeks or creates opportunity</td>
</tr>
<tr>
<td>Perpetrator has problems with mental health, personality disorders or substance abuse.</td>
<td>Staff lack adequate training and supervision and feel undervalued in role</td>
<td>Perpetrator has desire to control / assert power / oppress / have authority over / restrict choices, punish / belittle</td>
</tr>
<tr>
<td>Perpetrator has feelings of jealousy or obsession towards the vulnerable adult</td>
<td>Perpetrator feel powerless and lack autonomy, feel unable to make a difference in their caring role</td>
<td>Perpetrator acts of prejudice e.g. hate crime</td>
</tr>
<tr>
<td>Abusive behaviour is normalised and not judged as abusive, downplaying its importance or holding on to outdated views and practices</td>
<td>Control is a cultural / organisational norm / staff being victimised and bullied</td>
<td>Seeks gratification / acts of greed / gain and puts own needs first</td>
</tr>
<tr>
<td>Perpetrator has suffered abuse, had a poor education or lacked an emotionally chose relationship in childhood</td>
<td>Understaffing</td>
<td>Seeks out easy targets / the weaker who are easier to bully and intimidate</td>
</tr>
<tr>
<td>There is a complex relationship between the perpetrator and vulnerable adult that may have a long history of complexity</td>
<td>Perpetrator find high care needs difficult, finds problems difficult to cope with and uses negative strategies and feels incompetent / overwhelmed</td>
<td></td>
</tr>
<tr>
<td>The relationship between the perpetrator and vulnerable adult may have been poor and could have involved abuse towards the perpetrator</td>
<td>High levels of stress / carer burden</td>
<td></td>
</tr>
<tr>
<td>Both perpetrator and vulnerable adult mistrust services / outside influence</td>
<td>Carers feel isolated and unsupported and lack respite</td>
<td></td>
</tr>
<tr>
<td>The perpetrator is unable to express emotion or resolve problems verbally especially if they are themselves a victim</td>
<td>Perpetrator is opportunist, willing to take advantage whenever opportunities arise. Move to proactive</td>
<td></td>
</tr>
</tbody>
</table>
This new categorisation contains factors that are very diverse (from the emotional experience of obsession to the management issue of understaffing). To some extent, whether these factors are seen as motivations, excuses, reasons or contributing factors in abuse, is a question of semantics and will differ depending on perspective. For example a service provider may look at some of the items in the reactive category as potentially contributing factors that need to be dealt with in order to minimise the risk of abuse. On the other hand a perpetrator may cite the same factor as the reason they abused a vulnerable adult.

What other explanations exist for potential perpetrator motivation?

The new personal / relational category has been developed to reflect the inter-related aspects of abuse. The fact that these aspects have received less attention is not unique to adult protection. Hamberger et al (1997) notes the interpersonal context is neglected by studies into domestic violence as a factor in motivation. This is interesting given there is widespread common sense understanding that the precursors to violence can pre-date the incident itself. Most of the case studies examined in this study involve a long relationship between perpetrator and the vulnerable adult and this is not unusual. Therefore it is not surprising that participants in this study have identified the relevance of personal and relational factors in contributing to motivations to abuse.

Development of the personal / relational category has allowed for a more accurate placing of some of the motivations previously categorised as reactive or proactive. So, for example as Flemke & Allen (2008) argue, motivations such as jealousy highlight the interpersonal context that ignites abuse episodes for some. In recent years there has been a greater emphasis on relationship dynamics in domestic violence work with several authors emphasising the relational basis of domestic violence (Allison et al 2008; Rosen et al 2005). Specifically Rosen et al (2005) identifies an expressive motive for domestic violence whereby the violence is used by one partner as a way of communicating an emotional experience to another. While caution should be exercised in making too many direct comparisons with vulnerable adult abuse, this study has supported many shared motivations. In particular the intensity of many relationships between a vulnerable adult and their main carer could be seen to mirror the intensity in domestic violence relationships and therefore factors in the interpersonal context may be similarly significant.

Many respondents hypothesised that the reasons abuse occurred could, at least in part, be related to historical or current relational context. But often this was a hypothesis rather than a certainty as often this information was not available to practitioners. In particular a lack of knowledge about forensic history or juvenile offending can leave practitioners only able to speculate about a person’s journey to becoming a perpetrator. This study has shown that inevitably people investigating abuse do hypothesise as to what relational factors have played a part in why abuse has occurred and that this hypothesising is informed by their experience and knowledge. What this study has done is to make some of this thinking more explicit but also illustrated a short fall in understanding of exactly how personal and relational factors contribute to motivation to abuse.

To what extent can an understanding of motivations to commit generic violent crimes inform our understanding of motivation to abuse vulnerable adults?

Looking into other fields that can inform thoughts on motivation to abuse vulnerable adults was a key idea underpinning this study. Diverse sources were accessed for the literature review including topics
such as cruelty to animals. Cross-subject analysis seems to be helpful in understanding motivation and even in predicting future escalations in abusive behaviour – “it is important to ascertain the underlying motivations and recognize animal cruelty as one possible red flag in the understanding of violent behaviour” (Hensely & Tallichet, 2005: 1441).

It is clear from the high levels of agreement with many of the motivations that occurred in the survey that abuse of vulnerable adults shares some motivations with other forms of violent crime. However, there are two additional points of relevance here. First that the perspective of the respondent appears to influence their attempt to make sense of motivation and therefore the extent to which they agree with some of the motivations proposed. The second point is that facts about a perpetrator’s history or their current relationships were often not known by practitioners meaning they could only speculate on the extent to which these factors were significant. Given the propensity of historical or relational factors in the literature on generic violent crime it is reasonable to assume that they play a part in determining why vulnerable adult abuse occurs.

The extent to which motivations to commit generic violent crime apply to adult protection appears to depend on the nature of vulnerable adult abuse. There were strong levels of support for the idea that type of perpetrator (e.g. staff member, family carer), the type of abuse (e.g. physical, neglect) and the setting (e.g. care home, own home) all influence the motivations to abuse and the nature of that abuse. Further research is needed to explore the impact of these variables on patterns of motivation further.

To what extent are perpetrator motivations reflected in protection and safeguarding strategies in Wales?

Perpetrator motivation is not a key focus of adult protection investigations in Wales. This is not to say that it is not of interest to practitioners but rather it is a secondary issue. It may in some cases get more attention than others, but is not explored in detail as a matter of course. One of the potential reasons for this is that a focus on ‘did abuse happen’ and if so ‘what can be done now’ may mean that questions such as ‘how was this able to happen’ or ‘why did this happen’ get less attention in an investigation. The pressure on practitioners are two-fold – they need to both determine and enforce a plan of action (such as a protection plan) while at the same time providing data to populate reports to the Welsh Assembly Government that demonstrate their knowledge of key data recorded in each case. Inevitably the required information becomes the focus of the investigation and other issues (such as perpetrator motivation) may not receive attention when they are not part of the required recording. The danger is that adult protection investigations become a procedural exercise without the in-depth work taking place that could lead to better long term outcomes.

Discussion took place at the Expert Focus Group about the extent to which the current system helped or hindered an analysis of perpetrator motivation and the focus group were divided. Most practitioners are positive about the need for a formalised system but differed in the degree to which balance was needed between mechanisms and creativity. Some felt that investigating why abuse had occurred would be possible within the current system. Others felt that the current system does not encourage a focus on why and can be overly mechanistic. A third perspective was that the system itself was adequate but whether it was utilised in the correct way through the skilled and experienced investigator in practice was the issue.

In terms of adult protection practice the study showed that a varied picture exists across Wales and while perpetrator motivation is not a focus of the Wales Interim Policy and Procedures (SSIA, 2010) there are some practitioners who are interested in this area and see it as a key component. While
examples of practitioners looking into motivation, and using this knowledge to inform their protection plans exists, it was piecemeal and therefore represents something of a ‘postcode lottery’.

The factors that would determine whether an investigator did look into perpetrator motivation and to what degree was not looked at specifically within this study. However, variation in the skills, training and background of investigation teams lead to variations in approaches taken. Not all adult protection practitioners have a clinical background with some coming to the post via administrative / management roles. Some practitioners felt that a clinical background (e.g. a qualification in social work or nursing) would help both maintain a curiosity about why abuse occurs and provide a range of tools that could facilitate a greater understanding of perpetrator motivation. It is a concern that the diversity in backgrounds could result in different types of investigation. For example, it has been suggested that currently a lack of expertise amongst an interviewing panel could result in failures to recognise the importance of people’s histories (Rees & Manthorpe, 2009). Many participants in this study felt that adult protection could be enhanced by a greater understanding of the context that pre-dates the abuse.

Several participants had felt that the understandable focus on victims within adult protection had resulted in a lack of focus on perpetrators and they felt this needed to change. This position is supported by the literature. A study by Perez-Rojo et al (2008) looking at the significance in factors relating to the care receiver, care giver and the care setting founds that while all areas were important the caregiver dimension was the one with greatest influence in determining risk of elder abuse. Haaken (2008) warns that the danger with the stereotype of victims as ‘all good’ and perpetrators as ‘all bad’ limits curiosity about complexity that can in term inform social change.

The ethos of engagement with perpetrators or the consideration of methods to facilitate this is not part of adult protection policy in Wales. However many practitioners spoken to in the case study phase or as part of the Expert Focus Group thought that more should be done to engage relative / carer perpetrators in the investigation process and to develop a better understanding of their perspective. It appears that there is increasing consensus that this should be done but less understanding about how this can be achieved especially when the perpetrators are defensive in the face of loss of role or criminal charges. There is a need to share good practice about how engagement with perpetrators can be achieved. For example what success stories exist about the involvement of perpetrators in pre-discharge meeting and how were these positive experiences facilitated?

Not surprisingly, several practitioners reported that perpetrators would take up a defensive stance that made engagement problematic. There is also a concern by some that in seeking to defend their actions that perpetrators would provide false information, deflect the blame or minimise their own responsibility. These concerns are supported by the literature with Barter (2007) suggesting that face to face interviews may lead to males defending their actions due to social stigma that surrounds male violence against women. While these concerns are no doubt valid, they should not be seen as a reason not to engage but rather a need to provide greater support to practitioners in undertaking work with perpetrators. Interestingly, in a rare study into staff perpetrators who abused vulnerable adults the motivations cited as mitigation are ones that have been cited by practitioners in this study. Hussein et al (2009a), in summarising the mitigations that alleged staff perpetrators provided in reports suggest that they fall into three categories – characteristics of the victim, the working environment / workload and not being prepared either through lack of training or lack of awareness of what constitutes abuse.

The fact that this study supports the existence of proactive and reactive categories of motivation means that support is also given to existing measures that make a contribution to addressing these motivations. Most notable is probably the development of the Vetting and Barring scheme but also
initiatives to support carers. There has been several pieces of recent legislation that have relevance for carers in Wales such as the Carers (Equal Opportunities) Act (Department of Health, 2004) and the Work and Families Act (Department for Business, Innovation and Skills, 2006). Other helpful initiatives are moves to promote standards in care settings such as the development of increasingly robust contracting and contract monitoring in social service departments Contracts and Commissioning Units. Where more attention is needed is in considering how relationships between vulnerable adults and significant people in their lives can be improved. Reducing relational motivations should be the next challenge. Members of the research team have argued elsewhere that advocacy can be helpful in that the advocate can report concerns to appropriate personnel as long as they have a good understanding of adult protection procedures (Jenkins & Davies, 2011). They further state that advocacy should be focused on enabling those with little power to have some control and thus contribute to minimising the power differentials identified in this study. The promotion of advocacy as key to prevention of abuse is supported by the review into the adult protection guidance in Wales and the recent Department of Health report into the role of health service practitioners in safeguarding work (Department of Health, 2011; Magill et al, 2010).

In summary, it appears that the current adult protection system in Wales does not facilitate as a matter of course an understanding of why perpetrators do what they do. Practitioners report that they often feel the outcomes of investigations are compromises and that in some cases there remain concerns about perpetrators’ future behaviour. An improved focus on perpetrator motivation can only improve investigation outcomes. The next challenge is to consider how this can be improved.

**In what ways can protection and safeguarding policies and practice be improved by increased understanding of perpetrator motivation?**

The vast majority of participants in the study believed that understanding more about the motivations / reasons behind abuse can lead to a more informed approach to stopping abuse from occurring. The benefit of a refocusing on prevention in adult protection is not in doubt.

In an important paper on finding common ground in different fields of violent offending Daro et al (2004) states that

“Such policies (prevention) offer a much needed alternative to the treatment paradigms and the overt emphasis on prosecution and punishment that have marked societal responses to violence in previous decades. In addition this shift towards prevention offers a unique opportunity to craft strategies that address multiple forms of violence in ways difficult to accomplish once a specific form of violence has surfaced and a child, youth or adult has been labelled”

Both a common sense and economic argument can be made for preventative interventions to be well informed in order to maximise their chances of success. A preventative agenda has to be informed by an understanding of causation if it is to be effective (Quigley, 2001). It is therefore of concern that while the Welsh Assembly Government is committed to the preventative agenda, and it is a key part of the new Wales Interim Adult Protection Policy and Procedures (SSIA 2010), that little research has been undertaken into motivation.

This study has focussed on motivations to abuse and not motivations to care – but it could be argued that there is a relationship between these concepts. Identifying and maximising motivations to care (and the meaning people make of their caring role) may limit motivations to abuse (Quinn et al 2009).
Similarly Williamson & Shaffer’s (2001) research with spousal caregivers found the importance of carers seeing their relationship as rewarding in order to feel motivated to care and thus to minimise the risk of harmful behaviours. Also other research that looks at the development of interventions to reduce psychological distress on caregivers (such as Gallagher-Thompson et al 2003) could be informed by information on motivation. For example, in relation to reactive motivations, innovative programmes exist in the US to meet caregivers’ need for support and assistance. These include training programmes for those most at risk of becoming abusive (Institute on Aging, 2002). While this form of preventative work clearly has cost implications there is an economic argument in reducing the costs associated with investigations and subsequent remedial actions as well as the clear moral argument for reducing abuse.

One area where understanding of the relational and historical context of abuse is especially needed in order to ensure longer term protection is where the perpetrator will have an ongoing relationship with the victim. For example, when perpetrator and victim are in a relationship together or members of the same family. The need for engagement is two-fold. First, if perpetrators believe that practitioners are genuinely interested in their account they are more likely to share valuable information. Several practitioners reported a ‘blinkering effect’ that can occur where they do not see the perpetrator as a carer but merely as a perpetrator. It is unlikely this helps the ability to relate with interest and curiosity with the individual. Second, if the perpetrator can be engaged in the need for the protection plan and in abiding by its directives, then a better longer term outcome can be assured. This is not to say it is an easy task but as a member of the Expert Focus Group stated “It’s good social work practice really, making sure you have a relationship with the alleged perpetrator so that you can get an insight into why you might have cycles of abuse.”

What could prove challenging – but is beyond the scope of this study – is the extent to which the needs of the perpetrator influence a protection plan which is focussed on the needs of the victim? While this would be something that would require consideration it would in itself be a useful debate for investigating teams to have.

Increasing investigator dialogue about motivation is something that needs to be considered. It was felt by some investigators that the ‘tick-box’ approach of some investigations limited the opportunities both for reflective discussion and creativity in the way teams work. Examples of good practice existed where investigators drew creatively on a wide range of tools that could contribute to deepening understanding about what had occurred and to developing longer term solutions. For example, the use of risk assessments, chronologies, forensic profiling / assessment, family conferencing, carer needs assessment, domestic abuse assessments, therapeutic interviewing, the involvement of psychologists / probation. The Expert Focus Group felt that access to these potential resources currently depended on time, what was available locally and what could be afforded.

There are other less structured ideas that should be given consideration. The Expert Focus Group concurred with the research team’s thought that perhaps some practitioners lack confidence in discussing their thoughts about motivation. Perhaps they worry that their subjective opinion is insufficiently factual and unproven. The impact of these concerns is a silencing of debate that could be illuminating. This is unfortunate as some practitioners report the value that subjective knowledge can bring, for example by those who cite the role of ‘soft intelligence’. It is not about coming up with the definitive answer to why abuse occurred (and such an answer might not exist), rather it is looking more holistically at the wider context for the perpetrator to see if clues exist that can contribute to understanding.
It is only human nature to try to make sense of situations – this process will be going on within the minds of practitioners whether they voice them or not. The findings of this study strongly concur with a point made by a member of the Expert Focus Group:

“We are not psycho-analysts and so understanding why someone abuses a vulnerable adult can be an extremely complex issue. However, the reality is, I would suggest, that when we’re looking at cases people do make some assumptions of motivation so its better that we do that explicitly and overtly rather than not even recognising it ourselves.”

More attention needs to be paid to how overt conversations about motivation can be both stimulated and structured. This could be through the use of a simple mapping tool such as the Motivation Mapping Tool – MMT (Figure 1). Knowledge about a case can be used to consider where the perpetrator fits on to the tool and different perceptions between the investigating team discussed.

![Motivation Mapping Tool](image)

**Figure 1 – Motivation Mapping Tool**

It is expected that the dialogue that results from the use of the MMT would in itself lead to a greater consideration of motivation by the investigating team. If well facilitated it should also lead to an improvement in the confidence of practitioners in trusting their clinical judgment and being prepared to share their views on why abuse has occurred. This tool would fit well with the ‘round table approach’ that the Expert Focus Group concur currently works well “sometimes the very act of getting a number of people around the table talking about something that probably everybody has been worried about for some time but perhaps has not talked in that way and giving a structured way to have that discussion can lead to something very creative.”
There may still be a need to include an awareness session on the use of the tool as part of the training for practitioners. In fact what is included in the training of practitioners is key in ensuring that the ‘post-code lottery’ regarding consideration of motivation within investigations does not continue. If, as this study suggests, there is widespread belief that perpetrator motivation should be of interest to adult protection practitioners, it is important that it is covered in investigator training. It is recommended that this would include awareness of the categories of motivation, their inter-relatedness and approaches to identifying, discussing and making use of motivations to develop appropriate interventions. Work has recently begun Wales into the competencies required by adult protection practitioners. It is hoped that outcomes from this study could inform the inclusion of competencies that relate to perpetrator motivation.

It makes sense that only through uncovering motivations can treatments be designed to address these motives and avoid violence (Ross & Babcock, 2009). For example Beech et al’s (2009) study categorising sexual offenders by motivation type went on to make suggestions for treatment based on differing motivations. If motivation is insufficiently understood there is a risk of adopting a ‘one size fits all’ approach that lacks the complexity of situation / culture / context and socially constructed meaning (Lindhorst & Tajima, 2008). Examples exist outside adult protection of how this has occurred and how it can be improved upon through greater emphasis on motivation in planning interventions. There has been caution in the adult protection community not to overly link the field of child protection to adult protection due to the rightly held belief that protecting adults presents different challenges (Williams, 1995). However, this reticence should not go so far that potential learning between different fields does not take place – especially given the generic motivation for violent crime found in this study.

For example, a PhD study by Brashear (2005) that a ‘one size fits all’ treatment programme failed to address diversity in motivation. They tended to focus on extrinsic motivations while not addressing intrinsic motivations. In his PhD with ten Alaskan men involved in domestic violence he developed a ‘typology profile’ of each man to identify their intrinsic motivations. There are a number of post-abuse interventions that are used to a lesser or greater extent in Wales that can serve to both prevent future abuse and mitigate the impact of abuse. For example an investigator on the Expert Focus Group spoke of observers being brought in to a nursing home to understand more about what it was like to work in this home. Other examples include the use of advocacy, buddying/ carers for carers, therapeutic support and family conferencing and are all possibilities but the authors have found in an earlier study that the availability and uptake of these options is variable around Wales (Davies et al 2009).

Finally a clear gap exists in the absence of statistics on types of motivation. No reference to any aspect of motivation is required by the reporting system and therefore does not appear in Welsh Assembly Government monitoring. So several challenges exist – to identify motivations, to consider motivations when planning interventions and then to ensure availability and use of appropriate interventions.

In summary, knowing more of the context for the perpetrator, working to engage them in the investigation and, if appropriate in the protection plan, could lead to better outcomes. Adult protection practitioners need both the tools and the confidence to look at motivations and to do so in a consistent way across Wales.
Study Limitations

Several limitations need to be considered in generalising the findings of this study. First, the sample was small and cannot be said to provide a definitive account of the views of adult protection practitioners in Wales. However the work was originally proposed as a ‘scoping’ study given the absence of any similar work in this area. Second, that while all key sectors involved in adult protection were involved in the study, the sample from the local health boards (n=5) is particularly small. It is therefore possible that issues particularly pertinent to health staff have not been reported. Third, it was originally planned that factors that may impact on motivation to abuse (such as gender or setting) and which emerged from phase 2 as being important would be used to structure the recruitment of case studies in phase 3. Unfortunately recruitment for phase 3 was less successful than had been hoped and the research team took on all case studies that met the inclusion criteria. Fortuitously the case studies were very diverse and covered a range of genders, settings, abuse types and perpetrator types. Therefore it is not thought that the lack of a stratified sample hindered the study in any way. There is a methodological challenge to research that requires practitioners to share their concerns about their practice and the practice of others. Some people are understandably reluctant to critique their own actions and may present their experiences in an overly positive light. Getting to the ‘truth’ of such a complex and emotive issue as adult protection is challenging. It could be argued that an absolute truth does not exist and all that is possible is to get an informed opinion albeit a subjective one. The data analysis method, Interpretative Phenomenological Analysis, attempts to make sense of data that itself is the participants attempt to make sense of the phenomena under question. This was a valid and appropriate method for an area of study that is under-explored. The study could be criticised for lacking the perpetrators’ own accounts of their actions. However it is felt that the outcomes of this scoping study has highlighted many issues of interest that can be carried forward into further structured work with perpetrators.
Conclusions and Recommendations

This study has shown a diversity of motivations for the abuse of vulnerable adults. These motivations broadly map onto the categories of proactive and reactive motivations and there is also a third cluster of motivations that are more relational. Motivations rarely occur in isolation and several issues within a category or between categories can be relevant in a single case. In cases of repeat offending motivations can shift over time.

Although the practitioners who took part in this study had opinions about perpetrator motivation they also frequently did not have enough information to know which factors contributed to motivation. This was particularly true with perpetrator characteristics, perpetrators’ history or relational factors between the perpetrator and the victim.

Current approaches to prevention of abuse are focussed on two main areas. This study supports the value of this work. First, proactive motivations are tackled by attempts to select the ‘right’ people to work in health and social care through methods such as CRB checks. However this could be enhanced by considering how personal characteristics and motivations for the work could be better assessed, perhaps through considering a role for psychometric testing in selection. Second, reactive motivations are tackled by maximising a quality health and social care system through policies and procedures, adequate staffing, strong management, attempts to address staff morale / satisfaction and abuse awareness raising / training. In addition there are currently several initiatives that aim to improve human rights of people in Wales. For example the work of the Older Persons Commission, the Dignity and Respect Campaign and work to raise awareness and tackle disability hate crime. It is not overstating the case to state that proactive motivation where vulnerable people are specifically targeted due to being easy targets or ‘non-persons’ (Kivela, 1995) is a human rights issue.

Another positive step is the inclusion in the new Wales Interim Adult Protection Policy and Procedures (SSIA, 2010) of a chapter devoted to prevention and this clearly states that all parties have prevention responsibilities. It also emphasises that this should not be restricted to preventing a specific case recurring but applies to wider prevention. There appears to be an increasing recognition that adult protection cannot afford to be dominated by a reactive response characterised by investigating abuse when it occurs. Instead a proactive approach to preventing abuse occurring in the first place should be at the heart of what adult protection means in both practice and policy.

Where prevention work is being done this study found a focus on staff perpetrators. Prevention work to stop abuse within families still requires more efforts as the picture across Wales is variable. There are some efforts to deal with reactive motivation amongst family carers through the provision of support, training and respite services. However, the issue of proactive motivations amongst family (and other informal carers) is one that is not systematically addressed. A focus on strategies to address proactive and reactive motivations only represents two thirds of the picture. The proposed personal /relational motivations require a similar level of attention and consideration needs to be given to initiatives to better understand and address these motivations. There is a clear need to give greater emphasis to working with families to prevent abuse developing within the family.

A key finding of this study is the neglect of perpetrator motivation within the adult protection process. There is wide variation and the degree to which it is considered appears to vary across Wales and to be linked to the skills, experience and interest of the designated lead manager or adult protection coordinator. However, perpetrator motivation and the questions of why and how situations arose where abuse occurred are not examined systematically as a matter of course. Instead the focus is on what happened and plans for remedial action that needs to be taken. Monitoring required for the
Welsh Assembly Government does not require information on perpetrator motivation. This has two results – first, it encourages a different focus to adult protection investigations and second, it means that statistics on the factors that contribute to the existence of abuse are not recorded. This means that it is only possible to speculate on the prevalence of different motivations. Similarly in their report into elder abuse for The Law and Justice Foundation by Ellison et al (2004) note that no definitive research has been done on causality and this remains a neglected topic in all areas of vulnerable adult abuse. An absence of prevalence statistics and more detailed research understanding of motivation means that prevention work is not as informed as it could otherwise be. This does not make economic or moral sense. Vulnerable adults deserve prevention interventions that are properly informed by a rigorous evidence base. If perpetrator motivation is not better understood there is little chance that abuse can be reduced.

The research team propose the following recommendations:

**Practice recommendations**

**Developing the context of adult protection work**

1. A more proactive stance needs to be taken to identify and respond to risks based on a better understanding of perpetrator motivation – and to reduce the reactive nature of much current adult protection work
2. Adult protection professionals in Wales should identify and share good practice about engagement with perpetrators with the view to developing good practice guidelines that could be adopted at a National level. Networks such as the four Adult Protection Forums and PAVA Wales could be used here.
3. Selection procedures for health and social care roles should enable personality and motivation for the work to be assessed, for example considering the use of psychometric testing or vignettes to assess how people respond to challenging situations
4. Training of people undertaking investigations should include specific guidance on engaging with perpetrators based on examples of good practice. The Joint Investigator Training should be available throughout Wales.
5. Welsh Assembly Government monitoring forms should require some reference to motivation in order to improve the focus of investigating teams on this
6. Given the high propensity of power / control motives in the abuse of vulnerable adults, support is given to The Older People’s Commissioner for Wales (2009) statement that advocacy has a vital role to play in the prevention and protection of older people from abuse.
7. Examples of good practice in the use of these techniques in building a more complete picture of why and how abuse was able to happen should be shared between Adult Protection coordinators
8. Awareness of the range of creative techniques that could inform an adult protection investigation should be raised and referral pathways for accessing these options promoted to all Adult Protection Co-ordinators

**Improving the motivation aspects of investigations**

9. Considerable effort is needed to improve engagement with perpetrators both in terms of understanding the context of their abuse and, in cases where an ongoing relationship exists, in ensuring their commitment to protection plans
10. Adult protection practitioners need training in perpetrator motivation that includes the three types of motivation identified in this study and methods for ascertaining the motivation of alleged perpetrators in cases they are involved with. Any competency framework developed in Wales should include reference to perpetrator motivation.
11. Exploratory dialogue on motivation should become the norm during an adult protection investigation at strategy meetings.
12. A tool such as the Motivation Mapping Tool (MMT) should be used to stimulate discussion on adult protection.
13. Adult protection investigations should seek to gather information about the possible motivation of the alleged perpetrator and this should be summarised in the investigation report.
14. The further and final strategy meetings should seek to come to a view about the motivation of the alleged perpetrator in order to inform the Individual Protection Plan and, where appropriate, to provide support to the alleged perpetrator.

**Policy recommendations**

15. Adult protection committees have an expectation to have a strategy for prevention at the generic as well as the case level – this should be informed by an understanding of perpetrator motivation.
16. Advice on the protection of vulnerable adults from abuse at an all Wales level should make links to different forms of motivation.
17. Consideration should be given within adult protection policy/procedures to how relational motivations are identified and dealt with.
18. Investigations into the adoption of specific adult protection legislation similar to that in Scotland should be undertaken.
19. All Wales documentation should be developed on working with perpetrators during an adult protection investigation.
20. Policies on information record keeping and information sharing need to be reconsidered in order that the requirements of privacy do not overshadow the need for agencies to better understand a person’s history.
21. Information on perpetrator motivation should be included in all awareness raising training and more in depth information and guidance on assessing motivation should be included in Designated Lead Manager and Adult Protection Investigator training.
22. No reference to any aspect of motivation is required by the reporting system and is not covered in the Welsh Assembly Government monitoring. Basic reporting should be piloted at regional level as a step towards all Wales reporting.
23. The category of relational motivations emphasised that victims can be complicit in abuse, protect perpetrators and be ignorant of the abusive nature of what is happening to them – awareness raising for service users needs to be informed by other fields where an understanding of complex relationship dynamics has informed interventions (e.g. domestic violence work, systemic family therapy etc) – this can lead to specific adult protection research and inform practice.

**Further research recommendations**

**Priorities**

24. To fulfil the need for a three pronged approach to understanding motivation this study should be followed by a) work with perpetrators of abuse against vulnerable adults should be undertaken to hear their accounts b) work with victims especially where abuse has occurred within the family.
25. Research should be undertaken into how the three categories of perpetrator motivation can be mapped onto specific abuse prevention strategies and the impact of these measured through analysis of prevalence statistics.
26. This study has proposed a simple Motivation Mapping Tool to be used as a dialogic tool but which also may have the potential for assessing risk of repeat offending. A pilot of this tool should incorporate an audit of motivations and qualitative work on the way the tool is used / how it influences dialogue on motivation in adult protection investigations.
27. Some motivations appeared to be more relevant to staff perpetrators and others to perpetrators who were family members or informal carers. A comparison study into perpetrator motivation...
should consider how these two contexts are similar and different and how this can inform a two pronged prevention agenda.

28. A clear gap exists in the absence of prevalence statistics on types of motivation. Research can help to both pilot methods of reporting motivation and in the eventual analysis of motivation at an all Wales level.

**Additional studies**

29. A quantitative study into the prevalence of the three categories of perpetrator motivation established in this study (proactive – reactive – relational) should be undertaken.

30. The newly proposed personal and relational category requires further qualitative exploration in order that its components can be addressed via targeted prevention work.

31. According to work by Quinn et al (2009) identifying and maximising motivations to care (and the meaning people make of their caring role) may limit motivations to abuse. Research evaluating the impact of such intervention programmes could provide an innovative and positive approach to improving the evidence base for prevention work.

32. Practitioners in this study report the stress and complexity of adult protection work but also the variation in how they work. Qualitative work with practitioners could help best understand their support needs and the challenges they face in their role. This work could have multiple outputs including reducing variations across Wales and inform the training of new practitioners.

33. There was general agreement that different types of abuse have different patterns of motivation. Further research into perpetrator motivation should consider how motivations map onto specific methods of perpetrating abuse.
References


Older People’s Commissioner for Wales (2009) A Scoping Study of Advocacy with Older People in Wales for the Older People’s Commissioner for Wales. Cardiff: Older People’s Commissioner for Wales.


Williamson GM & Shaffer DR (2001) Relationship quality and potentially harmful behaviours by spousal caregivers: How we were then how we are now. *Psychology and Aging* 16 (2) 217-226.
Appendix 1

Perpetrator Motivation Project – Data Collection Form

<table>
<thead>
<tr>
<th>Completed by (initials)</th>
<th>Date:</th>
</tr>
</thead>
</table>

**Search:** A ( ) or B ( )
A = AP specific literature in context of abuse
B = General perp motivation (not AP)

**Full ref:** (in order of: author surname, initial, (date), name of article, name of journal, Vol, page numbers)

**Type of article:** Research ( )
(Contain details on aims, methods, results, discussion etc) or
Opinion piece ( )

**Article refers to:** (tick all that apply)
- Vulnerable adults ( )
- Children ( )
- Victims of Domestic Violence ( )
- Animal cruelty ( )
- Bullying ( )
- Other (state)………………………………………..

"Specify which type(s):
- Learning disability ( )
- Physical disability ( )
- Elderly, mental infirm ( )
- Hearing impaired / deaf ( )
- Mental Health( )
- Older Adults ( )
- Visual impairment / blind ( )
- Substance misuse ( )

Only refers to ‘vulnerable adults’ type not indicated ( )

**Motivation** (i.e. ideas on WHY perpetrators may act referred to in this paper)
TICK EACH CATEGORY THAT APPLIES

1) **Reactive abuser** ( ) Give as much details as possible:
(relates to poverty, organisational culture, lack of support, carer burden, poor management, poor working conditions etc)

2) **Proactive abuser** ( ) Give as much details as possible:
("bad apple" – serial abuser, actively seeks out target to harm, references to criminal records checks)

3) **Other** ( ) Give as much details as possible:
(all other references to why perpetrators act that does not appear to fit into the above categories – if unsure if fits in (1) or (2) please use this section.)
Exploring the motivations of perpetrators who abuse vulnerable adults

Dear (insert name),

We would like to invite you to take part in an important all Wales study into the motivations of perpetrators who abuse vulnerable adults. You have received this email because you have either expressed an interest in the study or have been identified as having a role that includes involvement in POVA / Safeguarding work.

Who manages and funds this study
The study is managed by a research team from the University of Wales Newport (with support from the University of Glamorgan) and Powys Social Services is the study partner. The study received funding from the Welsh Assembly Government’s Wales Office for Research and Development. Ethical approval has been received to undertake this work within social services and NHS local health boards from the South East Wales Research Ethics Committee. Staff from the police and independent sector organisations will also be invited to participate.

Why this study matters
Understanding why perpetrators abuse vulnerable adults is crucial to the prevention agenda. It has been our experience that many people involved in POVA have thoughts about this issue but no research to date has collected these ideas. This is your chance to share your experiences and ideas and contribute to this innovative research into why people abuse vulnerable adults.

What your participation will involve
We are contacting you about participating in Phase 2 of the study which involves completing an online survey. The survey can be accessed at http://outsidelearning.newport.ac.uk/course/view.php?id=55 and requires the enrolment key PowysUNUG to be entered. You will then be taken into the survey. The survey will take no more than an hour to complete.

Issues of confidentiality and anonymity
The online survey is totally anonymous it will not be possible for the research team to know who has replied. We do ask for some basic summary data such as the sector you work in and your gender but these are purely for analysis purposes. The only exception to anonymity would be if you contacted us to declare an interest in participation in the Phase 3 (case studies). We would give you further information at this point about how anonymity in this phase would be assured.

Confidentiality of the information provided throughout this study will be respected and data will only be used for outcome reports and academic publications and presentations. Any potentially identifying information disclosed by participants will be removed by the research team.
Do you have further questions
If you have further questions about any aspect of your participation or the study itself please do not hesitate to contact a member of the research team below

Dr Rachel Davies, Research & Enterprise Associate (Psychology) - UWN

Email: rachel.davies@newport.ac.uk

Mr Mick Collins, Powys Social Services

Email: mickcol@powys.gov.uk Telephone: (01597) 826811

Mr Andy Kaye, Powys Social Services

Email: andrzejkaye@powys.gov.uk Telephone: (01597) 826879
Appendix 3

Phase 3 Interview Schedule

Introduction

Provide information sheet and sign consent form

Can you set the context of this case for us?

The following relate to objective 2

What explanations have you developed to try to explain why this abuse occurred?

What specific motivations do you believe can be attributed to the perpetrator?

Would others involved in the case suggest different motivations?

What explanation did the perpetrator give for engaging in abuse?

Did they avoid this issue or try and justify their actions?

Were they aware (at the time) that their actions were abusive?

In terms of preventing repeated abuse or future abuse, do you think it would be useful to record the perpetrator’s statement and how it would impact the investigation?

What explanation do believe that the perpetrator would give for their actions if they were here today?

The following relate to objective 1

Some people have identified different categories of abuser – we would like to tell you about two of these and see if they are relevant to this perpetrator

Read out

THE REACTIVE ABUSER – The de-motivated, de-valued, stressed employee (or family member) who lacks adequate supervision and/or management support and commits acts of abuse out of desperation in impossible conditions. Often this abuse is linked to a ‘critical incident’ where the potential perpetrator felt pushed to take the step to become an abuser.

Is this relevant in this case? In what ways?

Read out

THE PROACTIVE ABUSER – The serial abuser (or ‘bad apple’) who has sought out contact with the vulnerable adult (e.g. through developing a friendship or working in the care sector) in order to commit acts of abuse or has been opportunist.

Is this relevant in this case? In what ways?

The following relate to research objective 4

This section uses information we have on the case from the PVA2

This section will follow up on some of the ideas supported in the survey – this list may change after survey analysis but at the moment we can ask about.........
Do you believe that where the abuse occurred was significant in some way?

Do you believe that the type of abuse that occurred in this case had different motivations to other forms of abuse?

Do you believe that the fact that the nature of the relationship between the perpetrator and the victim was significant in some way?

The following relate to research objective 5

In what ways have the outcomes of the case reduced the chance of this perpetrator abusing again?

With hindsight what aspects of care management could have prevented this abuse from taking place?

With hindsight what aspects of safeguarding policy could have prevented this abuse taking place?

With hindsight what aspects of safeguarding practice could have prevented this abuse from taking place?

When you think about this specific case what could staff have done differently to improve matters?

Do you think actions taken as a result of this case would reduce the perpetrators motivations to abuse in the future?

From your experience what information on perp motivation would help safeguarding staff most in preventing repeated abuse?

When you think about this specific case what lessons can be learnt that could inform policy or practice? (prompt) Anything else......

To close

Is there any other information you can give us that would help us have a greater understanding of the motivations to abuse in this case?
Exploring the motivations of perpetrators who abuse vulnerable adults

Information Sheet – Phase 3 Case Studies

We would like to invite you to take part in an important all Wales study into the motivations of perpetrators who abuse vulnerable adults. You have received this information because you have either expressed an interest in the study or have been identified as having a role that includes involvement in POVA / Safeguarding investigations.

Who manages, funds and reviews this study
The study is managed by a research team from the University of Wales Newport (with support from the University of Glamorgan) and Powys Social Services are the study partner. The study received funding from the Welsh Assembly Government’s Wales Office for Research and Development. Ethical approval from the South East Wales Research Ethics Committee has been received to undertake Phase 2 of this work within the NHS, social services, Police and independent sector. Ethical approval to undertake Phase 3 with social services and the police has been obtained from the Ethics Research Committee of the School of Health and Social Sciences at the University of Wales Newport.

Why this study matters
Understanding why perpetrators abuse vulnerable adults is crucial to the prevention agenda. It has been our experience that many people involved in POVA investigations have thoughts about this issue but no research to date has collected these ideas. This is your chance to share your experiences and ideas and contribute to this innovative research into why people abuse vulnerable adults.

What your participation will involve
The Principal Investigator, Dr Rachel Davies, will contact you and ask you some basic information about the case you have been involved in. All cases must be closed and must be suitably anonymised. You will be asked to complete a basic pro-forma (that contains the basic information recorded by the POVA process for national monitoring i.e. the type of abuse, the status of the perpetrator (staff, volunteer, friend etc), the outcome of the POVA case (proved, disproved, undecided). If the research team are assured about anonymity you will be asked to complete a consent form and an interview with a member of the research team will be arranged. It is possible that you know of another member of the investigating team who may be interested in participating in which case we can interview you together if you prefer. This individual will be sent this information sheet in advance of the interview and would also be required to complete a consent form. Interviews will be held at a location and time convenient to all. Questions will focus on your views on perpetrator motivation in general and in relation to the specific case identified. Interviews will last between 40-90 minutes and will be audio recorded for accuracy.

Issues of confidentiality and anonymity
All data is anonymised when audio recordings are transcribed. This means that while we will have your contact details in order to arrange to meet you these would not be linked to the data you give us in any way. Confidentiality of the data gathered throughout this study will be respected and data will only be used for outcome reports and academic publications and presentations. Any potentially identifying information disclosed by participants will be removed by the research team at the point of transcription. All transcribed data will be held securely for five years post the end of this study. The exception being pro-formas that did not proceed to research interviews. These will be destroyed. All audio recordings will be destroyed at the end of the study.

If you have further questions about your participation or the study itself please do not hesitate to contact a member of the research team below
Dr Rachel Davies, Research & Enterprise Associate (Psychology) - UWN
Email rachel.davies@newport.ac.uk

Mr Mick Collins, Powys Social Services
Email: mickcol@powys.gov.uk Telephone: (01597) 826811

Mr Andy Kaye, Powys Social Services
Email: andrzej.kaye@powys.gov.uk Telephone: (01597) 826879
Exploring the motivations of perpetrators who abuse vulnerable adults

Information Sheet – Phase 3 Expert Focus Group

We would like to invite you to take part in an important all Wales study into the motivations of perpetrators who abuse vulnerable adults. You have received this information because you have either expressed an interest in the study or have been identified as having a role that includes involvement in POVA / Safeguarding investigations.

Who manages, funds and reviews this study
The study is managed by a research team from the University of Wales Newport (with support from the University of Glamorgan) and Powys Social Services are the study partner. The study received funding from the Welsh Assembly Government’s Wales Office for Research and Development. Ethical approval from the South East Wales Research Ethics Committee has been received to undertake Phase 2 of this work within the NHS, social services, Police and independent sector. Ethical approval to undertake Phase 3 with social services and the police has been obtained from the Ethics Research Committee of the School of Health and Social Sciences at the University of Wales Newport.

Why this study matters
Understanding why perpetrators abuse vulnerable adults is crucial to the prevention agenda. It has been our experience that many people involved in POVA investigations have thoughts about this issue but no research to date has collected these ideas. This is your chance to share your experiences and ideas and contribute to this innovative research into why people abuse vulnerable adults.

What your participation will involve
A focus group will be arranged at a regular adult protection coordinators meeting. At this meeting you will be asked to sign a consent form if you want to take part in the focus group. The group will be audio recorded. Some ideas that have emerged from the study so far will be put forward by the research team to stimulate discussion. You are free to share any thoughts on the topic under investigation.

Issues of confidentiality and anonymity
All data is anonymised when audio recordings are transcribed. Confidentiality of the data gathered throughout this study will be respected and data will only be used for outcome reports and academic publications and presentations. Any potentially identifying information disclosed by participants will be removed by the research team at the point of transcription. All transcribed data will be held securely for five years post the end of this study. All audio recordings will be destroyed at the end of the study.

If you have further questions about your participation or the study itself please do not hesitate to contact a member of the research team below

Dr Rachel Davies, Research & Enterprise Associate (Psychology) - UWN
Email rachel.davies@newport.ac.uk

Mr Mick Collins, Powys Social Services
Email: mickcol@powys.gov.uk Telephone: (01597) 826811

Mr Andy Kaye, Powys Social Services
Email: andrzej.kaye@powys.gov.uk Telephone: (01597) 826879
Exploring the motivations of perpetrators who abuse vulnerable adults

CONSENT FORM – Case Study & Expert Panel

Please Tick

I understand that my participation will be anonymous and any identifying material will be removed at the transcription stage (   )

I understand that anonymised data will be used in reports and publication (   )

I understand this consent form will be kept securely and separate from research data (   )

I am willing to take part in this study (   )

Signature………………………………………………………………………………………
Witnessed by (researcher)………………………………………………………………………
Date..............................................................................................................................