

Intimate Partner Violence Among Older Women and Men in Spain: Prevalence and Types

Belén Charro-Baena, PhD

Department of Psychologie, Pontificia Comillas University, Madrid, Spain

Antonio Rúa-Vieites, PhD

*Department of Quantitative Methods, Pontificia Comillas University,
Madrid, Spain*

Carmen Meneses-Falcón, PhD

*Department of Sociology and Social Work, Pontificia Comillas University,
Madrid, Spain*

This investigation analyzes the prevalence and type of intimate partner violence (IPV) suffered by men and women over 65 years of age. A cross-sectional study was conducted in 24 Senior Citizen Centers in the Community of Madrid, Spain. An ad hoc questionnaire was developed and 1,030 subjects (826 women and 204 men) aged 65–93 years participated. A factor analysis was performed with the different types of violence and a binary logistic regression to analyze the probability of risk of the type of violence suffered by older people with IPV. Women experienced more cases of IPV than men, although, in both groups, physical violence was lower, and the psychological or social type was more prevalent. According to the study, women were 2.2 times more likely to experience physical violence, 3.1 times more likely to experience economic violence, and 1.8 times more likely to experience verbal violence concerning men. IPV experienced by older people differs from that of younger people. It is necessary to give visibility to IPV in seniors in terms of preventive and intervention actions that can be implemented.

KEYWORDS: prevalence and characteristics of partner abuse; partner abuse and social-cognitive processes; emotional abuse and control; anger and partner abuse

INTRODUCTION

Intimate partner violence (IPV) is any behavior within an intimate relationship that causes physical, psychological, or sexual harm to the partners. It includes controlling behaviors such as isolation from family members and/or friends and restriction of access to employment, education, financial resources, or healthcare (World Health Organization & Pan American Health Organization, 2012). Although it can occur in all settings, cultural, religious, socioeconomic groups, and sexes, most scientific literature on IPV placed women as victims and men as perpetrators. Studies on IPV suffered by men are less frequent than those in which women are the victims. Some authors believe that this is due to the lower visibility of male victims of IPV. On the one hand, it has been found that men tend to report IPV cases less frequently than women unless they have suffered severe injuries due to IPV (de Macedo Bernardino et al., 2016). Sometimes, this lack of reporting stems from previous experiences, where they received inadequate help from professionals and/or care organizations facing their experiences with disbelief (Dixon et al., 2022; Hines & Douglas, 2016), or even treating them as liars, inadequate parents, or abusers rather than victims (Taylor et al., 2021). Despite lower male visibility, for several years, studies in the United States and Europe have recognized that the perpetration of IPV by both partners is quite frequent (Archer, 2000; Charles et al., 2011; Dokkedahl & Elklit, 2019; Nybergh et al., 2013; Wexler, 2020). For this reason, studies on IPV refer to bidirectionality, mutual violence, symmetrical violence, or reciprocal violence (Johnson & Ferraro, 2000). However, the fact that bidirectionality exists does not mean that the type of IPV inflicted and suffered is the same. Thus, some studies point out that men present themselves more frequently as victims of psychological and/or verbal violence by their partners and women as victims of physical or sexual violence (Ahnlund et al., 2020; Costa et al., 2019). Others detect that men are equally victims of physical and coercive violence (Bates, 2020; Dixon et al., 2022; Durfee, 2011; Lysova & Dim, 2022). Regarding the temporality of IPV, Desmarais et al. (2012) conducted one of the most extensive reviews of physical IPV in men and women, analyzing 111 Anglo-Saxon studies published between 2002 and 2012. They found that the pooled prevalence rates of IPV experienced over a lifetime were generally higher among women, while that of violence experienced in the past year was somewhat higher among men.

Regarding the characteristics of IPV as a function of victim age, some studies have pointed out that vulnerability and negative consequences increase with age (McGarry et al., 2016). Roberto et al. (2014), reviewing 57 sources of the empirical literature on IPV in older people, find that physical or sexual violence decreases with age, while nonphysical maltreatment increases or intensifies. In the interaction of age and gender, in older women, they detected a reduction in physical violence with increasing age and a higher prevalence of psychological and economic violence (Magalhães et al., 2016; Stöckl & Penhale, 2015; Warmling et al., 2017;

Zink et al., 2006). In addition, older women victims of IPV have been found to suffer lasting psychological distress, greater social and economic dependence on their partner, poorer physical and psychological health as a consequence of age-associated abuse, conservative ideas about gender roles, and lower quality of life (Breiding et al., 2008; Finfgeld-Connett, 2014; Montero et al., 2013; Stöckl & Penhale, 2015; Zink et al., 2006). Studies on the interaction between male sex and older age in IPV are very limited (Carthy et al., 2019), but a relationship has been found between experienced IPV and increased occurrence of depressive symptoms compared to younger men (Reid et al., 2008).

These negative consequences of IPV in older people make it essential to give it visibility, separating it from the general category of elder abuse in which it is usually hidden in studies on the subject (Reeves et al., 2007; Straka & Montminy, 2006). Therefore, the aim is to explore the characteristics of IPV in the Spanish aged to obtain data that will help develop programs that identify, prevent, and minimize this violence, as well as improve their healthcare. The first objective will be to detect the prevalence and type of IPV experienced by this population over the course of a lifetime. The second objective is to identify whether there are differences in the type of IPV experienced by older men and women. Finally, we seek to determine the probability that women and men experience one or the other type of IPV.

METHOD

Design

To carry out this exploratory study, an ad hoc questionnaire was created consisting of 30 questions that included sociodemographic characteristics and situations of IPV that had occurred throughout life. The team of researchers went to the Senior Citizen Centers to conduct the interviews. The Madrid Agency for Social Care; the Coordinator of the Senior Citizen Centers of Madrid; and each director of a Senior Citizen Center gave their consent for the study. The Ethics Committee approved the project of the university to which the investigators belong.

Population and Selection Criteria

The population consists of men and women attending Senior Citizen Centers in the Community of Madrid, Spain. The selection criterion was that they should be 65 years of age or older (the cut-off age was motivated by the retirement age in Spain) and without cognitive impairment. Initially, 15 centers were randomly selected, but this was later extended to all centers that wished to participate. In total, 24 Senior Citizen Centers were included out of the 32 in this community.

Data Collection

The researchers went to the senior centers on the days they agreed with their management. In most cases, the questionnaires were administered individually for the following reasons: some older people had difficulty reading or writing, others asked questions about the questions, and finally, in this way, the team ensured that the questions were answered. The participants were informed of the study's objectives and the confidentiality of their answers. Verbal informed consent was collected from the participants at the time of implementation.

Data Analysis

A descriptive analysis of the demographic data of the study was carried out, calculating frequencies and percentages. To analyze the type of IPV experienced, an exploratory principal component factor analysis was performed to uncover the latent structure in the original set of IPV variables, identifying groups of interrelated variables and reducing the attribute space from a large number of variables (22 in this case) to a smaller number of independent factors, dimensions, or constructs (5) that may or may not be evident from the direct analysis. The method used in factor analysis is principal component analysis, which extracts the maximum variance and places it in the first factor. Subsequently, it eliminates the variance explained by the first factor and extracts the second factor, and so on to the last factor. A Varimax rotation was also developed, which makes the understanding of the result more reliable (Panda et al., 2021). This study meets the requirements of relevance (determinant = 7.64E-006; KMO = .864; Bartlett's sphericity: $\chi^2 = 1671.13$; $df = 231$; and $p < .001$; Table 1). With the factors obtained, binary logistic regression was performed to determine the odds ratio (OR) for men (value 0) and women (value 1) who experienced IPV. The significance level was set at $p \leq .05$. Also, these original variables were recoded into two categories to determine the differences between men and women (Table 2).

RESULTS

A total of 1,030 people (826 women and 204 men) responded to the questionnaire, with an age range of 65–93 years. A total of 19.22% of the participants ($n = 198$; 177 women and 21 men) reported having experienced IPV at some time in their lives or at present (23.98% of women and 10.29% of men). Among those who experienced IPV, the mean age was 72.8 years ($SD = 5.4$), the majority were married (38%) or widowed (30%), the mean cohabitation with the partner was 35.47 years ($SD = 14$), and 91% had at least one child. Regarding the level of education, 42% had primary education, and only 10% had a university education. In addition, 87.1% had a paid job, and 84% had a pension at the time.

TABLE 1. Violence Factors Involved in Women and Men Who Have Experienced IPV. Rotated Component Matrix, Factor Loadings, and Total Variance Explained

Variables	Physical	Social	Psychological	Verbal	Economic
He/she has hit me.	.861				
He/she raised his hand toward me.	.829				
He/she slapped me.	.820				
He/she has pushed me.	.773				
He/she has threatened me with an object.	.690				
He/she has prevented me from entering the house.	.640				-.418
I have been afraid of him/her.	.609				
He/she prevented me from talking to another person of the opposite sex.		.799			
He/she prevented me from talking to others.		.798			
He/she controlled who I went out with.		.783			
He/she prevented me from seeing my family and friends.		.762			
He/she has turned my children against me.			.741		

(Continued)

TABLE 1. Violence Factors Involved in Women and Men Who Have Experienced IPV. Rotated Component Matrix, Factor Loadings, and Total Variance Explained (*Continued*)

Variables	Physical	Social	Psychological	Verbal	Economic
He/she treated me with indifference.			.735		
He/she told me what to think.			.670		
He/she made unpleasant comments about my physique.			.670		
He/she criticized me and did not value me.			.652		
He/she embarrassed me in front of other people.			.529	-.406	
He/she made decisions without me.				.692	
He/she screams at me.	.469				
He/she has insulted me.				.551	
He/she has prevented me from working.					.801
He/she has prevented me from handling money.					.514
Variance	21.14%	15.75%	14.73%	6.94%	6.07%

The variables related to abuse were distributed into five groups based on factor analysis: physical, sexual, social, economic, and psychological violence (Table 1).

Psychological violence was the most frequent among men and women, without significant differences. Regarding the other types of violence, more women reported

TABLE 2. Types of IPV (Positive Response) Among People Who Have Experienced IPV

	Females % (<i>N</i>)	Males % (<i>N</i>)	
	89.39 (177)	10.60 (21)	<i>P</i> -value
Have you ever felt mistreated?	22.2 (177)	10.5 (21)	<.001
TYPES OF VIOLENCE			
PHYSICAL VIOLENCE	Mean percentage	Mean percentage	
	35.9	24.8	
He/she has pushed me.	50.3 (84)	36.8 (7)	.266
He/she has slapped me.	36.1 (60)	10.5 (2)	.025
He/she has hit me.	29.9 (50)	10.5 (2)	.074
He/she has raised their hand toward me.	47.3 (78)	31.6 (6)	.193
He/she has threatened me with an object.	33.3 (54)	31.6 (6)	.878
He/she has prevented me from entering the house.	18.7 (31)	27.8 (5)	.355
ECONOMIC VIOLENCE	Mean percentage	Mean percentage	
	37.9	23.6	
He/she has prevented me from handling money.	36.7 (61)	36.8 (7)	.994
He/she has prevented me from working.	39.1 (63)	10.5 (2)	.014
SEXUAL VIOLENCE			
He/she has forced me to have sex.	40.0 (66)	15.8 (3)	.039
SOCIAL VIOLENCE	Mean percentage	Mean percentage	
	45.1	46.4	
He/she has prevented me from talking to others.	55.4 (92)	47.4 (9)	.504
He/she has prevented me from seeing my family and friends.	41.6 (69)	44.4 (8)	.814
He/she has prevented me from talking to another person of the opposite sex.	46.1 (76)	50.0 (9)	.750

(Continued)

TABLE 2. Types of IPV (Positive Response) Among People Who Have Experienced IPV (*Continued*)

	Females % (<i>N</i>)	Males % (<i>N</i>)	
	89.39 (177)	10.60 (21)	<i>P</i> -value
He/she has controlled who I go out with.	49.1 (81)	44.4 (8)	.708
He/she has turned my children against me.	32.9 (54)	45.0 (9)	.283
He/she has embarrassed me in front of other people.	45.9 (78)	47.4 (9)	.902
PSYCHOLOGICAL VIOLENCE	Mean percentage 62.5	Mean percentage 63.7	
He/she has made decisions without me.	58.6 (99)	68.4 (13)	.407
He/she has criticized me and not valued me.	76.2 (131)	80.0 (16)	.701
He/she has made unpleasant comments about my physique.	36.7 (61)	42.1 (8)	.647
He/she has told me what to think.	50.9 (84)	72.2 (13)	.085
He/she has treated me with indifference.	67.1 (110)	84.2 (16)	.127
He/she has insulted me.	75.8 (125)	78.9 (15)	.758
I have been afraid of him/her.	57.8 (96)	15.8 (3)	.001
He/she screams at me.	77.5 (131)	68.4 (19)	.375

having received a slap (36.1–10.5% of men), that their partner had prevented them from working (39.1–10.5% of men), having been forced to have sexual relations (40–15.8% of men), and having been afraid of their partner (57.8–15.8% of men). No significant differences were found between men and women regarding the remaining factors (Table 2).

With these factors, a binary logistic regression analysis was performed among all those who had suffered IPV to determine the risk probabilities in each gender for each factor. Women were 2.2 times more likely to suffer physical violence, 3.1 times more likely to suffer economic violence, and 1.8 times more likely to be verbally abused compared to men (Table 3).

TABLE 3. Multivariate Analysis, Binary Logistic Regression

Variables in the equation	B	E.T.	Wald	Gf	Sig.	Exp(B)	I.C. (95%)	
							Lower	Upper
Physical violence factor	.806	.411	3.860	1	.049	2.240	1.002	5.008
Social violence factor	−.147	.299	.241	1	.623	.864	.481	1.551
Psychological violence factor	−.227	.270	.706	1	.401	.797	.469	1.354
Verbal violence factor	.565	.322	3.082	1	.079	1.759	.936	3.306
Economic violence factor	1.124	.450	6.245	1	.012	3.077	1.274	7.430
Constant	2.605	.420	38.418	1	.000	13.527		

Hosmer and Lemeshow test: $\chi = 26.575$; p -value = .001.

DISCUSSION

The first objective of this study was to detect the prevalence and type of IPV experienced by Spanish older men and older women. The results showed a higher prevalence among women (24%) than among men (10%). As for women, this rate is slightly lower than that provided by the latest statewide macro-survey on gender violence conducted in Spain, which indicates that 31.4% ($N = 2,357$) of women aged 65 years or older have suffered physical and/or sexual and/or psychological violence at some point in their lives (Delegación del Gobierno contra la Violencia de Género, 2020). In the case of men over 65 years of age with IPV, no Spanish data have been found to contrast the prevalence found in this study. In other countries, the prevalence of lifetime IPV in old men ranges widely, from 2.7% in Sweden (Ahnlund et al., 2020) to 48.3% in Brazil (Warmling et al., 2021).

The second objective was to detect differences in the type of IPV experienced by older men and women. The result of the factor analysis carried out with the variables related to abuse allowed the confirmation of the types of violence referred to in most of the literature—physical, economic, sexual, social (or coercive), and psychological. In this research, psychological violence appears prevalent in older

men and women, with no significant differences between the two sexes. Having explored lifetime IPV, these results do not allow us to specify whether this type of violence was the one that predominated in a single intimate relationship and throughout life or, as some studies point out for the case of women, the different types of IPV derived in this one as a consequence of the advanced age of victims and perpetrators (Magalhães et al., 2016; Stöckl & Penhale, 2015; Warmling et al., 2017; Zink et al., 2006).

Regarding physical violence, the only difference found between the sexes was that women reported being slapped to a greater extent than men. This means that women in this study report a less severe form of physical violence, such as being hit. And again, since the responses span the entire life course, we cannot state whether the severity of aggression decreased with age, as has been noted in other work (Poole & Rietschlin, 2012; Warmling et al., 2021).

Also, women reported to a greater extent than men that their partner had prevented them from working. In this sense, it should be taken into account that these women belong to a generation in which Spanish culture expected women to stay at home and take care of household chores, so many of them have never worked (Alcañiz Moscardó, 2017). Studies such as those by Beaulaurier et al. (2007), Zink et al. (2006), and Zorrilla et al. (2010) have linked being a victim of IPV and women's difficulty in leaving the context of violence with unemployment, the absence of paid work outside the home or other economic dependence on the partner.

Likewise, regarding sexual violence, it was significantly more frequent among women than men to have been forced to have sex at some time in their lives, as other research on older women has shown (Boira et al., 2013). Finally, the percentage of men who had felt fear of their partners was significantly lower than that of women, coinciding with previous studies (Durfee, 2011).

Finally, the third objective of the study was to determine the risk probabilities for older women and men to experience one or the other type of IPV. The logistic regression results showed that women who experienced IPV were twice as likely as men to suffer physical and verbal violence. This aspect has been mentioned in several studies (Warmling et al., 2017). Lastly, it has been found that women are three times more likely than men to suffer economic violence, which is consistent with the data provided in the state macro-survey on violence against women in 2019 in Spain. This survey shows that women older than 65 years present higher percentages of this type of violence exerted by their current partner compared to those under this age (Delegación del Gobierno contra la Violencia de Género, 2020).

One of the study's limitations is that, having focused on IPV suffered throughout life, it has not been possible to compare this evolution with what is happening today or to analyze whether it has been with one or different partners over time. In future research, it would be interesting to investigate these questions in such a way as to determine whether the passage of time

changes the IPV situation. It would also be useful to be able to assess the consequences of victimization on older men and women.

CONCLUSION

The results of this exploratory study have highlighted the importance of delving deeper into the IPV experienced by men and women in the last stage of life when they are most vulnerable. Even if IPV transforms as the years go by and physical aggressions decrease, they sometimes become chronic and may be more resistant to change. Although this work has found that women are more likely to be at risk of IPV, denying that they may also be perpetrators may minimize assistance to male victims. Knowing what leads to older people's mistreatment can help to develop programs that identify, prevent, and minimize this violence. Health professionals should be especially attentive to the signs, since older men and women may not always be able to verbalize their request for help.

REFERENCES

- Ahnlund, P., Andersson, T., Snellman, F., Sundström, M., & Heimer, G. (2020). Prevalence and correlates of sexual, physical, and psychological violence against women and men of 60 to 74 years in Sweden. *Journal of Interpersonal Violence*, 35(5–6), 1539–1561. <https://doi.org/10.1177/0886260517696874>
- Alcañiz Moscardó, M. (2017). Trayectorias laborales de las mujeres españolas. Discontinuidad, precariedad y desigualdad de género. *Revista de Estudios de Género, La Ventana*, 5(46), 244–285. <https://doi.org/10.32870/lv.v5i46.6079>
- Archer, J. (2000). Sex differences in aggression between heterosexual partners: A meta-analytic review. *Psychological Bulletin*, 126(5), 651–680. <https://doi.org/10.1037/0033-2909.126.5.651>
- Bates, E. A. (2020). “Walking on egg shells”: A qualitative examination of men's experiences of intimate partner violence. *Psychology of Men & Masculinities*, 21(1), 13–24. <https://doi.org/10.1037/men0000203>
- Beaulaurier, R. L., Seff, L. R., Newman, F. L., & Dunlop, B. (2007). External barriers to help seeking for older women who experience intimate partner violence. *Journal of Family Violence*, 22(8), 747–755. <https://doi.org/10.1007/s10896-007-9122-y>
- Boira, S., Carbajosa, P., & Marcuello, C. (2013). La violencia en la pareja desde tres perspectivas: Víctimas, agresores y profesionales [partner violence from three perspectives: victims, abusers, and professionals]. *Psychosocial Intervention*, 22(2), 125–133. <https://doi.org/10.5093/in2013a15>
- Breiding, M. J., Black, M. C., & Ryan, G. W. (2008). Prevalence and risk factors of intimate partner violence in eighteen U.S. states/territories, 2005. *American Journal of Preventive Medicine*, 34(2), 112–118. <https://doi.org/10.1016/j.amepre.2007.10.001>

- Carthy, N. L., Bates, E. A., & Policek, N. (2019). Promoting inclusivity in intimate partner abuse research: Exploring gender and age. *Partner Abuse, 10*(3), 359–372. <https://doi.org/10.1891/1946-6560.10.3.359>
- Charles, D., Whitaker, D. J., Le, B., Swahn, M., & DiClemente, R. J. (2011). Differences between perpetrators of bidirectional and unidirectional physical intimate partner violence. *Partner Abuse, 2*(3), 344–364. <https://doi.org/10.1891/1946-6560.2.3.344>
- Costa, D., Hatzidimitriadou, E., Ioannidi-Kapolo, E., Lindert, J., Soares, J., Sundin, Ö., Toth, O., & Barros, H. (2019). The impact of intimate partner violence on forgone healthcare: A population-based, multicentre european study. *European Journal of Public Health, 29*(2), 359–364. <https://doi.org/10.1093/eurpub/cky167>
- Delegación del Gobierno contra la Violencia de Género. (2020). *Macroencuesta de violencia contra la mujer 2019. [Macro-survey of violence against women 2019]*. Ministerio de Igualdad. https://violenciagenero.igualdad.gob.es/violenciaEnCifras/macroencuesta2015/pdf/Macroencuesta_2019_estudio_investigacioNpdf
- de Macedo Bernardino, Í., Barbosa, K. G. N., da Nóbrega, L. M., Cavalcante, G. M. S., de Castro Martins, R., & d'Avila, S. (2016). Profile of men who are victims of physical violence by an intimate partner. *Journal of Family Violence, 31*(5), 617–624. <https://doi.org/10.1007/s10896-016-9815-1>
- Desmarais, S. L., Reeves, K. A., Nicholls, T. L., Telford, R. P., & Fiebert, M. S. (2012). Prevalence of physical violence in intimate relationships, part 1: Rates of male and female victimization. *Partner Abuse, 3*(2), 140–169. <https://doi.org/10.1891/1946-6560.3.2.140>
- Dixon, L., Treharne, G. J., Celi, E. M., Hines, D. A., Lysova, A. V., & Douglas, E. M. (2022). Examining men's experiences of abuse from a female intimate partner in four english-speaking countries. *Journal of Interpersonal Violence, 37*(3–4), 1311–1337. <https://doi.org/10.1177/0886260520922342>
- Dokkedahl, S., & Elklit, A. (2019). Understanding the mutual partner dynamic of intimate partner violence: A review. *Partner Abuse, 10*(3), 298–335. <https://doi.org/10.1891/1946-6560.10.3.298>
- Durfee, A. (2011). “I’m not a victim, she’s an abuser”: Masculinity, victimization, and protection orders. *Gender & Society, 25*(3), 316–334. <https://doi.org/10.1177/0891243211404889>
- Finfgeld-Connett, D. (2014). Intimate partner abuse among older women: Qualitative systematic review. *Clinical Nursing Research, 23*(6), 664–683. <https://doi.org/10.1177/1054773813500301>
- Hines, D. A., & Douglas, E. M. (2016). Relative influence of various forms of partner violence on the health of male victims: Study of a helpseeking sample. *Psychology of Men & Masculinity, 17*(1), 3–16. <https://doi.org/10.1037/a0038999>
- Johnson, M. P., & Ferraro, K. J. (2000). Research on domestic violence in the 1990s: Making distinctions. *Journal of Marriage and Family, 62*(4), 948–963. <https://doi.org/10.1111/j.1741-3737.2000.00948.x>
- Lysova, A., & Dim, E. E. (2022). Severity of victimization and formal help seeking among men who experienced intimate partner violence in their ongoing rela-

- tionships. *Journal of Interpersonal Violence*, 37(3–4), 1404–1429. <https://doi.org/10.1177/0886260520922352>
- Magalhães, M. J., Rodríguez Castro, Y., Ruido, P. A., & Braga Lopez, R. D. (2016). Elderly victims of gender violence in Portugal: Invisible and not heard? *Health Care for Women International*, 37(12), 1304–1319. <https://doi.org/10.1080/07399332.2016.1179311>
- McGarry, J., Ali, P., & Hinchliff, S. (2016). Older women, intimate partner violence and mental health: A consideration of the particular issues for health and healthcare practice. *Journal of Clinical Nursing*, 26(15–16), 2177–2191. <https://doi.org/10.1111/jocN13490>
- Montero, I., Martín-Baena, D., Escribà-Agüir, V., Ruiz-Pérez, I., Vives-Cases, C., & Talavera, M. (2013). Intimate partner violence in older women in Spain: Prevalence, health consequences, and service utilization. *Journal of Women & Aging*, 25(4), 358–371. <https://doi.org/10.1080/08952841.2013.838854>
- Nybergh, L., Taft, C., Enander, V., & Krantz, G. (2013). Self-reported exposure to intimate partner violence among women and men in Sweden: Results from a population-based survey. *BMC Public Health*, 13, 845. <https://doi.org/10.1186/1471-2458-13-845>
- Panda, P., Mishra, S., & Behera, B. (2021). Developing a research methodology with the application of explorative factor analysis and regression. *IOSR Journal of Business and Management*, 23(4), 23–31. <https://doi.org/10.9790/487X-2304022335>
- Poole, C., & Rietschlin, J. (2012). Intimate partner victimization among adults aged 60 and older: An analysis of the 1999 and 2004 general social survey. *Journal of Elder Abuse & Neglect*, 24(2), 120–137. <https://doi.org/10.1080/08946566.2011.646503>
- Reeves, K. A., Desmarais, S. L., Nicholls, T. L., & Douglas, K. S. (2007). Intimate partner abuse of older men: Considerations for the assessment of risk. *Journal of Elder Abuse & Neglect*, 19(1–2), 7–27. https://doi.org/10.1300/J084v19n01_02
- Reid, R. J., Bonomi, A. E., Rivara, F. P., Anderson, M. L., Fishman, P. A., Carrell, D. S., & Thompson, R. S. (2008). Intimate partner violence among men. *American Journal of Preventive Medicine*, 34(6), 478–485. <https://doi.org/10.1016/j.amepre.2008.01.029>
- Roberto, K. A., McPherson, M. C., & Brossoie, N. (2014). Intimate partner violence in late life: A review of the empirical literature. *Violence against Women*, 19(12), 1538–1558. <https://doi.org/10.1177/1077801213517564>
- Stöckl, H., & Penhale, B. (2015). Intimate partner violence and its association with physical and mental health symptoms among older women in Germany. *Journal of Interpersonal Violence*, 30(17), 3089–3111. <https://doi.org/10.1177/0886260514554427>
- Straka, S. M., & Montminy, L. (2006). Responding to the needs of older women experiencing domestic violence. *Violence against Women*, 12(3), 251–267. <https://doi.org/10.1177/1077801206286221>

- Taylor, J. C., Bates, E. A., Colosi, A., & Creer, A. J. (2021). Barriers to men's help seeking for intimate partner violence. *Journal of Interpersonal Violence*, 37(19–20), 18417–18444. <https://doi.org/10.1177/08862605211035870>
- Warmling, D., Lindner, S. R., & Coelho, E. B. S. (2017). Intimate partner violence prevalence in the elderly and associated factors: Systematic review. *Ciencia & Saude Coletiva*, 22(9), 3111–3125. <https://doi.org/10.1590/1413-81232017229.12312017>
- Warmling, D., Conceição, T. B., Lindner, S. R., & Coelho, E. B. S. (2021). Vitimização e perpetração da violência por parceiro íntimo em idosos: estudo transversal, Florianópolis, Santa Catarina, 2013/2014. *Epidemiologia e Serviços de Saúde*, 30(4). <https://doi.org/10.1590/s1679-49742021000400009>
- Wexler, D. B. (2020). When women abuse men: What we now know about female intimate partner violence. *Partner Abuse*, 11(4), 415–436. <https://doi.org/10.1891/PA-2020-0026>
- World Health Organization & Pan American Health Organization. (2012). *Understanding and addressing violence against women: Sexual violence*. World Health Organization. <https://appsw.who.int/iris/handle/10665/77434>
- Zink, T., Jacobson, C. J., Regan, S., Fisher, B., & Pabst, S. (2006). Older women's descriptions and understandings of their abusers. *Violence against Women*, 12(9), 851–865. <https://doi.org/10.1177/1077801206292680>
- Zorrilla, B., Pires, M., Lasheras, L., Morant, C., Seoane, L., Sanchez, L. M., Galán, I., Aguirre, R., Ramírez, R., & Durbán, M. (2010). Intimate partner violence: Last year prevalence and association with socio-economic factors among women in Madrid, Spain. *European Journal of Public Health*, 20(2), 169–175. <https://doi.org/10.1093/eurpub/ckp143>

Disclosure. The authors have no relevant financial interest or affiliations with any commercial interests related to the subjects discussed within this article.

Funding. The author(s) received no specific grant or financial support for the research, authorship, and/or publication of this article.

Correspondence regarding this article should be directed to Belén Charro-Baena, PhD, Universidad Comillas, Madrid 28049, Spain. E-mail: bcharro@comillas.edu