2015

Developing a peer educator program to raise awareness about elder abuse

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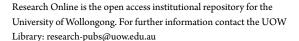*University of Prince Edward Island*, gjmcinnis@upei.ca

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ABSTRACT

There continues to be lack of public awareness about elder abuse. To help address this issue, we developed and piloted an elder abuse peer educator training program from an educational gerontology and health empowerment perspective. We describe the process employed to train older adults as peer educators. We present evaluation results from data collected from trained peer educators and those who attended educational sessions led by the trained peer educators. The results of the evaluation are useful in the continued development of our peer educator program and in identifying topics for further research.

INTRODUCTION

While an increased emphasis on elder abuse research has existed since the 1980s, a lack of public awareness about this issue is still evident, along with a lack of information on how to obtain help for those who are abused (Alt, Nguyen, & Meurer, 2011; Barnett, Miller-Perrin, & Perrin, 2011; Podnieks & Wilson, 2003). In our study, guided by both an educational gerontology and health empowerment perspective, we report the results from the development and pilot testing of an elder abuse peer educator program. The intent of our work is to further refine our program and to identify topics for further research.

While most elder abuse educational efforts focus on training professionals (Alt et al., 2011; Mills et al., 2012), we agree with others who identified that addressing elder abuse requires educating and empowering older adults themselves, in addition to professionals (Collins & Walford, 2008; Hawranik & McKean, 2004; Podnieks, 2008). Empowerment is a critical component of educational gerontology (Formosa, 2002; Maderer & Skiba, 2001), which is focused on the education of older adults, and education by older adults, based on self-actualization, social relations, increased well-being, and continuous learning (Hartford, 1990; Maderer & Skiba, 2006). Educational gerontology focuses on teaching and learning as a collective and negotiated enterprise amongst older adults with the potential to transform ageist social structures (Findsen & Formosa, 2011; Formosa, 2002).

Our work is also guided by a health empowerment perspective, which is a relational process that emerges from the older adult's personal and social contextual resources (Shearer, 2009). This perspective supports the older adult's participation in decisions and promotes positive health outcomes and affects his or her sense of control and feelings of power (Shearer, Fleury, Ward,

& O'Brien, 2012). Empowerment is viewed as both a process and an outcome by which people exhibit a degree of control and involvement in their lives. As a process, empowerment through the use of an educational intervention supports the person's ability to think critically and act autonomously (Anderson & Funnell, 2010). Although often focused on personal growth and political liberation culminating in social change, empowerment also is an outcome when as a result of this process, enhanced feelings of self-esteem, efficacy, and control occur (DeCoster & George, 2005). Beckingham and Watt (1995) posit that in order to age in a healthy way, older adults need greater control over their lives and access to tools to help them solve problems, such as elder abuse. If professionals wish to support the empowerment of older adults, they must be prepared to give up some control and reduce their status as experts (Beckingham & Watt, 1995). For some, elder abuse is now viewed as a human rights issue that includes the rights of autonomy and self-determination where the older adult works with an intervener, who does not need to be an expert, to identify the problem and explore solutions (Fraser, 2010; Podnieks, 2008). Older adults need to be empowered to take greater ownership in solutions to stop elder abuse and to build community networks that share information (Stephen, Little, and Duchesne, 2005). Hawranik and McKean (2004) argue that it is imperative that older adults be involved for elder abuse to be viewed as a serious social problem and to ensure that sufficient resources will be allocated to it. Such resources can include counseling, support groups, and education on safety planning and risk reduction that can work in partnership with adult protection services to empower and support older adults in abusive situations (Fraser, 2010). We believe that the use of peer education on the topic of elder abuse flows logically from an educational gerontology and health empowerment perspective.

Peer education involves information sharing between people who have common characteristics and similar experiences with the goal of influencing knowledge, attitudes, or behaviour (Peel & Warburton, 2009). A central concept of peer education is that the relationship between the teacher and learner is akin to both parties being experts, where the learners may know an equal amount, or more, about the content being taught (Choi, 2009). While the use of peer education is quite common with younger populations, the use of peer education among older adults is less common, but it is expanding (Khong, Farringdon, Hill, & Hill, 2015). The utilisation of older adults as peer educators is particularly well-documented in the chronic illness, injury prevention, and health promotion literature (Castro, Pruitt, Buman, & King, 2011; Hainsworth & Barlow, 2003; Hyland et al., 2006; Klug, Toobert, & Fogerty, 2008; Peel & Warbuton, 2009) and in lifelong learning centres (Choi, 2009; Leung, Lui & Chi, 2005). However, there is little research focused on peer educators and elder abuse.

We identified only one example of a program in Wales in which peer educators were trained to raise awareness about elder abuse (Collins & Walford, 2008). This program was created to address the danger that work with older adults was becoming paternalistic, in that work was being done for them and not with them. The objective was to increase awareness of the risks of abuse and how to get needed help. A professional trainer developed a training package including topics such as rights, forms of abuse, who abuses, where it happens, why people do not report abuse and to whom to report abuse. The trainer offered a one-day course to eight prospective trainers who were older adults

drawn from health and care agencies, including experienced volunteers. The intention was that after receiving training, the peer educators could be paired up to deliver educational sessions for groups of older adults in various settings. While details of a formal evaluation were not included in this article, the authors did include a list of comments and suggestions from those who attended the training program, including the following: ensuring that the training be case or story-based and focus on common risks; how to deal with any disclosures of abuse from victims or abusers; that it should be an educational focus, not a personal growth program for attendees; and that trainers must have the requisite skills and experience to work with groups of older adults and be knowledgeable of adult protection laws. The scant knowledge on the involvement of peer educators focused on elder abuse provided impetus for our work on this topic.

THE DEVELOPMENT AND IMPLEMENTATION OF A PILOT PEER EDUCATOR TRAINING PROGRAM

We received funding for a two-year project to raise awareness about elder abuse. In this section, we describe the process we followed to develop and implement a program in which we trained older adults to be peer educators. Prior research highlights the need for volunteer peer educators to receive adequate training and support (Karwalajtys et al., 2009; Sellon, 2014), and we thus focused a great deal of effort on developing a high quality training program and incorporating various methods to support their work.

An important component of peer educator training programs is ensuring that there are clear distinctions made between the role of peer educators and professionals, and that peer educators are not viewed as substitute professionals (Allen, 2004; Peel & Warburton, 2009). Professionals such as adult protection workers, health care professionals, and adult educators have an important role in providing training and support to peer educators and ensuring that they do not delve into topics and issues that are beyond their expertise and training, such as entering into a therapeutic relationship (Myers-Walls, Ballard, Darling, Anderson, & Myers-Bowman, 2011). We ensured that we followed these principles in developing our training program.

We hired a professional with expertise in developing and delivering training programs to lead the development of our training program. In developing the program, we utilised several resources including results from published research, input from the project's advisory group that included older adults, and input from the participants who attended the peer educator training sessions. In addition, we utilised material identified through conducting a review of programs and resources to raise awareness about elder abuse in Canada including: laws on abuse and neglect, a directory of victim services for older adults, adult victims of abuse protocols, a coordinated community response agreement, and an initiative to build capacity to respond to the abuse of older adults.

The peer educator training program included the following components: a pre-test and post-test on knowledge about elder abuse; a PowerPoint presentation containing information on different types of abuse, characteristics of abusers, why abuse is often not reported, and what to do if abuse is detected; three short videos depicting scenarios of abuse situations; a list of local support

services with contact information; brochures about elder abuse; and; speakers notes and a preparation checklist to use when delivering sessions.

The project coordinator recruited older adults to participate in the peer educator training program using various methods including word-of-mouth, presentations, e-mail notices, and information posted on community notice boards. Two different day-long training programs were held, and a total of 13 older adults participated, including nine women and four men. They had previously been employed, or continued to be employed, in a variety of areas including various aspects of education, healthcare, human services, office work, and technology. We provided the older adults with the materials, training, and support required to deliver educational sessions of approximately one hour with seniors' groups and other organisations.

During the training program, the participants had the opportunity to deliver a brief practice presentation using a laptop computer and data projector. While computer usage among older adults is increasing around the world, various factors can cause barriers to computer usage including the technology not meeting the needs of the user and not understanding the technology sufficiently enough to appreciate the benefits (Wagner, Hassanein, & Head, 2010). Because of this, we expected that some peer educators would prefer not to use a laptop computer and data projector, and we anticipated that this technology would not always be appropriate for the size or location of a particular educational session. Thus, in addition to a version of the presentation dependent upon a laptop and data projector, we created hard copies of materials for awareness raising sessions. We termed this a tabletop presentation.

The trained peer educators delivered educational sessions to people in various settings including seniors' groups, service organisations, and places of employment. The project coordinator provided support to the peer educators by helping them prepare for their sessions, and if requested, attending the sessions to provide support. Reasons why those who completed the peer educator training program but did not choose to provide educational sessions included the following: moving out of the province since completing the training, employment interfering with the delivery of the educational sessions, and not feeling confident enough to organise and deliver the sessions.

EVALUATION METHODS
We invited participation in the evaluation of the pilot elder abuse peer training program from two groups of people: 1) older adults who completed the peer educator training program (n = 13); and 2) older adults who attended sessions delivered by a peer educator (n = 97). We received approval from our university's Research Ethics Board to use the evaluation data we collected from these two groups for research purposes. While everyone who completed the peer educator training program or attended a session delivered by a peer educator was invited to participate in the evaluation, participation was voluntary. Below, we summarise the three parts of the evaluation and the number of people who participated in each.

- Five older adults filled out an evaluation form at the end of the training session they completed to become a peer educator.

- Four of the trained peer educators participated in an interview. Those who participated in an interview already provided educational sessions to older adults, or intended to do so, in the future.
- A total of 20 people who participated in an educational session led by a peer educator completed an evaluation form.

The evaluation approach used in this research was formative and participatory. The formative approach was based on a model for evaluation in instructional design developed by Weston, McAlpine, and Bordonaro (1995), which emphasises identifying a specific goal, and a clear definition of participants, roles, and instructional techniques used. This model is very applicable to training peer educators to deliver educational sessions about the abuse of older adults. While many definitions of participatory evaluation exist, all are based on a partnership approach to evaluation where stakeholders are actively engaged in developing and implementing the evaluation (Zukoski & Luluquisen, 2002). A participatory approach was taken throughout the evaluation to ensure that the evaluation approach was consistent with the planning and decision-making needs of the project team and the project funder and to ensure that the evaluation findings were relevant and useable. Our participatory approach involved input from a Project Evaluation Committee that included various stakeholders. This group was utilised to improve and clarify the evaluation methods, support the conduct of the evaluation, and provide context needed to understand evaluation findings and assist in the development of feasible recommendations for future project development.

Peer educators

Everyone who completed the peer educator training program was invited to complete an evaluation form that included questions on satisfaction with the training received (see Table 1). They responded using a Likert scale with five indicating satisfied and one indicating not satisfied. We calculated Likert response score means for each item. Participants were also invited to write additional open-ended comments about the training received.

Table 1
Satisfaction with Peer Educator Training

How satisfied were you with	Mean Level of Satisfaction (n=5)
The content of the presentation you will be using?	4.8
The relevance of the information to seniors?	5.0
The overall content of the training?	5.0
The language used by the presenter?	5.0
The training materials provided?	5.0
Your practice with the LCD projector and laptop?	5.0
The presenter's explanation and presentation of how to use the LCD projector and laptop?	5.0

Note. As measured on a Likert scale: 5 = *satisfied*, 1 = *not satisfied*

In addition, all of the four trained peer educators who had already conducted educational sessions, or were intending to, were invited to volunteer to participate in a telephone interview of approximately 20 minutes in length. Each was contacted by telephone, and all four indicated interest in participating in a telephone interview. We distributed an information letter and consent form to them by mail. After receiving the completed consent form by mail, a time was arranged for the interview to be completed by telephone with the evaluation consultant. The interviews occurred four to five months following the completion of a training session to become a peer educator. The interview questions were:

- What were the main reasons you decided to become a speaker as part of the speaker's bureau?
- What were your expectations of participating?
- Prior to this project, have you had previous experience with presenting or leading sessions?
- What did you gain by participating in the speaker's bureau training session?
- Did the training provide you with all the information and skills needed to conduct awareness sessions? If not, what else was needed?
- Have you conducted any awareness sessions to date? If yes, how do you feel the session went? Was the audience engaged? Do you have any suggestions for improving future sessions?
- Do you feel confident about conducting awareness sessions? If yes why? If not, why not?
- Do you have any other comments about the development of the speaker's bureau or the project more generally?

To analyse the interview data from the peer educators, we used thematic analysis, which is a form of pattern recognition allowing for themes to emerge directly using inductive coding (Fereday & Muir-Cochrane, 2006). Thematic analysis is particularly useful in understanding influences and motivations related to how people respond to events (Luborsky, 1994). Thus, thematic analysis lent itself well to exploring their experiences in training as a peer educator and in delivering educational sessions in the community, or their intention to do so. The data coding process involved generating initial codes, searching for themes, reviewing themes, and defining and naming themes that resulted in thematic codes that represented patterned responses within the data set (Braun & Clarke, 2006). We focused in particular on identifying themes to inform the ongoing development of the pilot peer educator program and in developing questions for further research.

Educational session participants

Everyone who participated in the educational sessions was invited to volunteer to complete an evaluation form that took approximately five minutes to complete. Questions on the evaluation form are included in Table 2. Each item was an open-ended question in which participants were invited to write a brief short answer response that we analysed thematically.

Table 2
Educational Session Participant Evaluation Results

Question	Responses (n = 20)
What is the most important thing you learned today?	• What to do if someone is abused (6) • Information about services or resources (5) • Awareness about the various forms of elder abuse (4)
Was there any particular area you would like to learn more about?	• How to report abuse or help the situation (3) • How to change behaviour (1) • How abuse is kept hidden (1)
Was the information understandable?	• Yes (8) • One question on a handout had a typo (1)
Was the method of presentation appropriate?	• Yes (13)
If you or a friend were being abused, would you know what to do to get help or who to call?	• Yes or yes after attending this presentation (13) • No (1)

Note. The participants did not all respond to each open-ended question. The bracketed numbers indicate the number of participants who wrote the same, or a similar, response.

EVALUATION RESULTS
We first present the evaluation results from data collected from the trained peer educators followed by results from the participants who attended the educational sessions led by the peer educators.

Peer educators
Five older adults who participated in the peer educator training session completed an evaluation form at the end of the session. They indicated a high level of satisfaction with the training they received. Their mean responses for each item are included in Table 1. For six of the seven items, they indicated the maximum satisfaction score of 5/5 including items on the relevance of the information to seniors, content of the training, training materials provided, and instruction and practice with using a data projector and laptop. Only one item on the content to be delivered in awareness raising sessions was rated slightly lower in level of satisfaction at 4.8/5. In the open-ended responses, three of the respondents wrote about some hesitation in using the projector and laptop, such as needing more practice with using this technology or not being confident that the technology would work when needed.

All four trained peer educators who had already conducted educational sessions, or intended to do so, volunteered to participate in a telephone interview. Three of the four trained peer educators had already conducted at least one educational session at the time of their interview. The results from these interviews are organised into the following themes identified through thematic analysis: training for peer educators, reasons for volunteering, prior educational experience and skills, effectiveness of the educational sessions and program sustainability.

Training for peer educators: All four participants found the peer educator training program to be informative, interactive and helpful. They commented on learning how elder abuse can occur in various forms and that the training was designed to provide very simple and straight-forward messages. Although the practice teaching activity was stressful for some, they found it to be a useful experience: "… I enjoyed the training session…we were given a good sense of the materials and how to use them by doing a mock presentation…."

For the three participants who had conducted educational sessions to date, all agreed that their training and the workshop materials provided were generally effective in getting the message across and for stimulating thinking and discussion among the session participants. No one had any suggestions with regard to additions to the training materials developed, and one participant suggested that the one-day training program could be completed in a shorter time frame.

Reasons for volunteering: We asked the peer educators why they volunteered to participate in the training program. For the most part, they indicated that elder abuse and its impacts is an important issue, that many people generally do not understand its impacts and ramifications, and that it was a cause with which they could easily identify and become involved: "… I have a high regard and respect for seniors and elderly people…they have worked hard to give to their families, their communities and their province over their years … they deserve to have quality of life in their senior years…."

Two of the peer educators had participated in a provincial forum that we held as part of the funded project and were able to see how important it is to ensure that services and supports are available to seniors as they age: "…I went to one of the seniors' forums and heard about the elder abuse awareness project…the more I heard about it the more it seemed like a good idea."

Prior educational experience and skills: Three of the four trained peer educators interviewed had substantial prior experience based on their training and work experiences in various careers. They generally felt comfortable and confident in delivering material and facilitating group discussions. For example, one peer educator indicated that "… I have quite a bit of experience presenting and leading sessions … I felt reasonably comfortable in my skills to do presentations…." One of the four trained peer educators had no previous experience presenting before groups or engaging groups in discussion. This participant felt strongly about this issue and that public education was very important, but being a peer educator herself was outside of her comfort zone.

Effectiveness of the educational sessions: All peer educators were pleased with the level of interest and engagement in the educational sessions and felt that the participants learned a great deal. For example, they indicated that session participants learned about issues surrounding mandatory reporting of elder abuse and that various types of abuse exist (i.e., financial, physical). They also indicated the participants learned about the amount of available information about resources: "… Many also appreciated the information about resources … that there were people to contact should they feel some elderly person needs help…." They also responded well to realistic scenarios being presented and discussed: "… People could really relate to the three scenarios describing

possible abuse ... and some were quite intrigued about the financial abuse piece ... about how this could be happening in all sorts of subtle ways ...."

Program sustainability: Generally, the peer educators felt the program was well-prepared in terms of material and presentation format, but there were a few suggestions regarding improvement in the future. One noted that it tends to be a "heavy" topic and wondered if there was some way to have it not be too depressing or not too much of a "downer" for participants. One asked whether there could be a shorter version of the educational session, such as 15-20 minutes. There were some questions about whose responsibility it was to organise educational sessions after funding for the project ended.

Three of the peer educators indicated that they would be interested and prepared to do additional educational sessions in the future. It was clear that they were committed to this issue and continuing this important work: "... it's really important that these types of awareness workshops continue, and [be] presented to as many groups and organizations as possible ...."

Educational session participants
We received a total of 20 evaluation forms from those who attended the educational sessions delivered by the trained peer educators. A summary of the open-ended results is included in Table 2.

Overall, data collected from participants who attended the educational sessions indicated that the information was understandable and that the method of presentation was appropriate. Some of the most important things that participants indicated they learned included what to do if someone is abused, available services or resources, and the various forms of elder abuse. Topics the participants would like additional information about included how to report abuse or help in a situation where abuse is occurring, how to change behaviour, and how abuse is kept hidden in our society.

DISCUSSION
There continues to be a lack of public awareness about elder abuse and how to obtain help when elder abuse is detected (Alt, et al., 2011; Barnett, et al., 2011; Podnieks & Wilson, 2003). Our overall intent was to inform the further development of a pilot peer educator program designed to address these issues and to identify topics for further research from an educational gerontology and health empowerment perspective. Throughout this study, we made every effort to empower older adults and to ensure that our educational tenants supported the older adults' sense of self, positive social relationships, increased well-being, and continuous learning. Health empowerment supports the recognition and enhancement of self-capacity of the person, their social contacts, and networks (Shearer, 2009). By purposefully participating in the elder abuse awareness program, health empowerment emerged from the older adult's awareness and engagement of both personal and social contextual resources. Personal resources identified were the ability to relate to the abuse scenarios, willingness to help prevent future abuse, the use of past experiences, and inner resources in presentation skills. Increased awareness in social resources was also identified, including awareness of strategies to connect to supportive people and awareness of educational resources and community agencies to assist the abused older adult. In the remainder of this section, we identify limitations of our evaluation of this program, recommendations for

our continued development of a peer educator program, and suggestions for future research.

Program evaluation limitations

Ideally, each of the trained peer educators and educational session participants would have taken part in the evaluation of this project, including completing an evaluation form and participating in an interview. However, as we had received approval from our University's Research Ethics Board for this project, participation in these evaluation activities was strictly voluntary.

While our results contribute to the scant evidence that trained peer educators could help to raise awareness about elder abuse (Collins & Walford, 2008), our sample size is too small to warrant generalising our findings to other peer educator programs. Although we had a limited amount of data, based on our review of the literature and our experiences of developing and implementing a first iteration of a peer educator program, we believe that this evidence warrants the continued development of our program to empower older adults about elder abuse using a peer education model. We encourage others interested in developing similar programs to build on our work.

Recommendations for continued peer educator program development

Similar to Collins and Walford (2008), we found that the process of training and supervising peer educators was crucial. Training about current elder abuse knowledge, training on effective educational techniques, and training in using presentation technology appeared to be especially helpful. Having an alternate method of delivery in the form of a tabletop presentation proved to be useful for those who chose this method for various reasons, including technical problems with the equipment. In addition, the project coordinator provided ongoing support, which is important for peer educators (Hainsworth & Barlow, 2003). Each of these aspects of training and program implementation proved important and should be included in subsequent efforts to implement a peer educator program on raising awareness about elder abuse using an educational gerontology and health empowerment perspective.

Some interesting insights emerged from the evaluation data collected from those who attended the educational sessions delivered by the peer educators. Although many indicated learning a great deal, such as what to do if elder abuse is detected, others desired further information on this topic. In the further development of our program, we will ensure that peer educators clearly present this information, provide opportunities for attendees to ask questions for clarification, and refer to handouts including resources that are locally available to help those experiencing elder abuse.

Although it required substantial effort to identify and recruit people to complete the peer educator training program, many did not deliver educational sessions. Of the 13 older adults who participated in the peer educator training program, only three actually delivered educational sessions in the community. We believe that these peer educators had some specific characteristics that made them particularly willing and effective in conducting the educational sessions. They were older adults who brought with them skills from their diverse backgrounds that included experience working with people in a variety of paid and unpaid professional roles. Castro et al. (2011) felt that while it was not required, prior experience for peer educators in health counseling or

facilitation was beneficial in their project on physical activity. Older adults who are able to draw on their backgrounds may feel more empowered to take on the peer educator role. In the future, we will collect information on prior experience and educational background as part of the application process for those who want to be trained as peer educators. In particular, we will recruit peer educators who do have some previous background working with people in professional and/or volunteer settings, preferably in an educational context.

In addition to increased efforts to recruit peer educators with particular characteristics, another method to recruit and retain peer educators is to compensate them for their time and expenses incurred, when feasible for the organisation (Peel & Warburton, 2009). In many instances, peer educators are unpaid volunteers; however, we identified one project in which peer educators were paid (Hyland et al., 2006). In the future development of our program, we will investigate how to provide some form of compensation for peer educators.

Suggestions for future research

One key issue that requires further research is how to ensure the sustainability of elder abuse peer educator programs. One possibility to explore is how to effectively partner with a permanent organisation with resources available to devote to peer educator recruitment, training, and supervision. For example, is there capacity for university research centres to support these programs in the long-term? Other opportunities to provide ongoing support to peer educators that could be explored include partnering with organisations such as agencies on ageing, seniors' resource centres, social workers, or adult protection services.

While there may be some concern about the role of professionals versus peer educators, there appears to be great potential for these two groups to work together cooperatively to raise awareness about elder abuse (Stephen et al., 2005). For example, we identified one effective program consisting of a combination of peer-led groups and expert-informed lectures (Klug et al., 2008). Further research exploring the effectiveness of professional versus peer led educational sessions and a combination of professional and peer led sessions is warranted. Ongoing research efforts are needed to better operationalise and test theoretical frameworks for empowerment interventions (Shearer et al., 2012).

While the cost savings to organisations of utilising peer educators is a posited benefit, additional research should be conducted on the cost effectiveness of peer education in this context (Castro et al., 2011; Collins & Walford, 2008; Peel and Warburton, 2009), including taking into consideration the complete cost of utilising peer educators, such as training, travel costs, and supervision.

In this research, we provided preliminary evidence about the feasibility of trained and supervised peer educators to educate others about elder abuse. An area of concern is a lack of significant follow-up to determine the long-term impact of educational interventions (Shearer et. al., 2012). Due to a lack of research evidence on the effectiveness and feasibility of peer educators working in the area of elder abuse (Choi, 2009; Klug et al., 2008; McDonald, 2011), we recommend that any initiatives on this topic incorporate high-quality evaluation activities and that these results be published in peer-reviewed sources in order to add to our limited knowledge.

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