

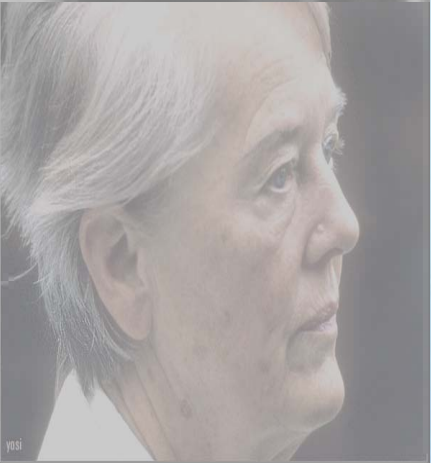


Community-Based Caring

*Domestic Violence and Sexual Assault
Against Older Victims*



Training for The Community- Based Advocate Demonstration Program



**Funded by the Miami-Dade County Alliance for Human
Services Grant E101 2004-2007**



Presented By

UNIVERSITY OF
Miami

SCHOOL OF MEDICINE

*Center on Aging and
Disabilities*

In collaboration with

**The Advocate Center
for Training and
Treatment [ACTT], a
division of The
Advocate Program, Inc.**

and

Laura R. Seff, MBA





Elder Domestic Violence Community-Based Advocate Program

- 3-year demonstration project funded by the Alliance for Human Services
- Community-Based Advocate will respond to referrals from community agencies
- Clients must be adults age 50+ who experience domestic violence and/or sexual assault and who do *not* qualify for services under the Elder Abuse statute (FS 825)

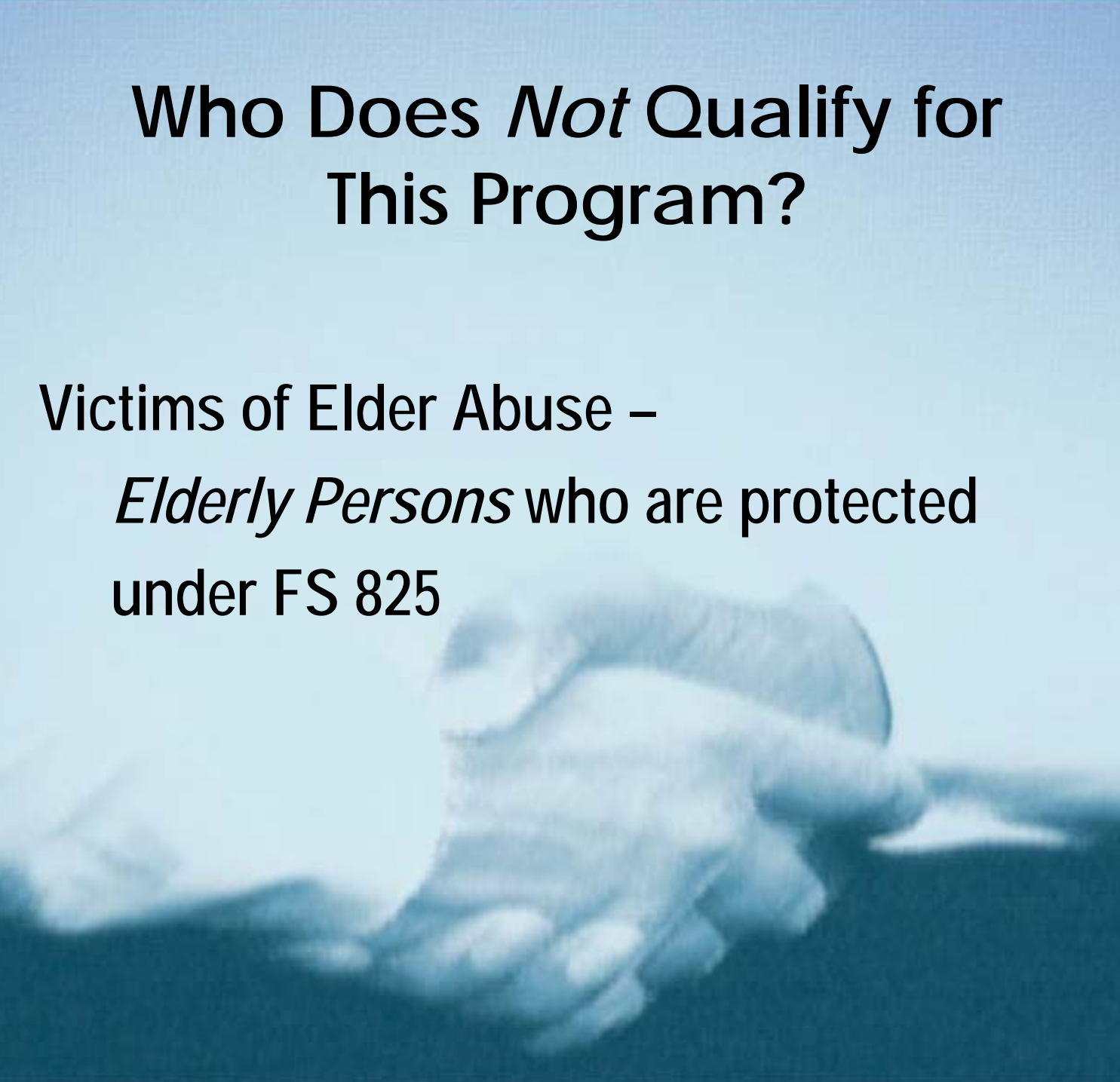
Target Population & Rationale

- The project focus is on outreach, intervention, and safety planning for men and women 50 years of age and older who experience DA and/or SA.
- This group is important because the dynamics of domestic abuse and sexual assault in older adults is not a primary focus in educational or training programs for DV, SA or Aging professionals.



Who Does *Not* Qualify for This Program?

Victims of Elder Abuse –
Elderly Persons who are protected
under FS 825



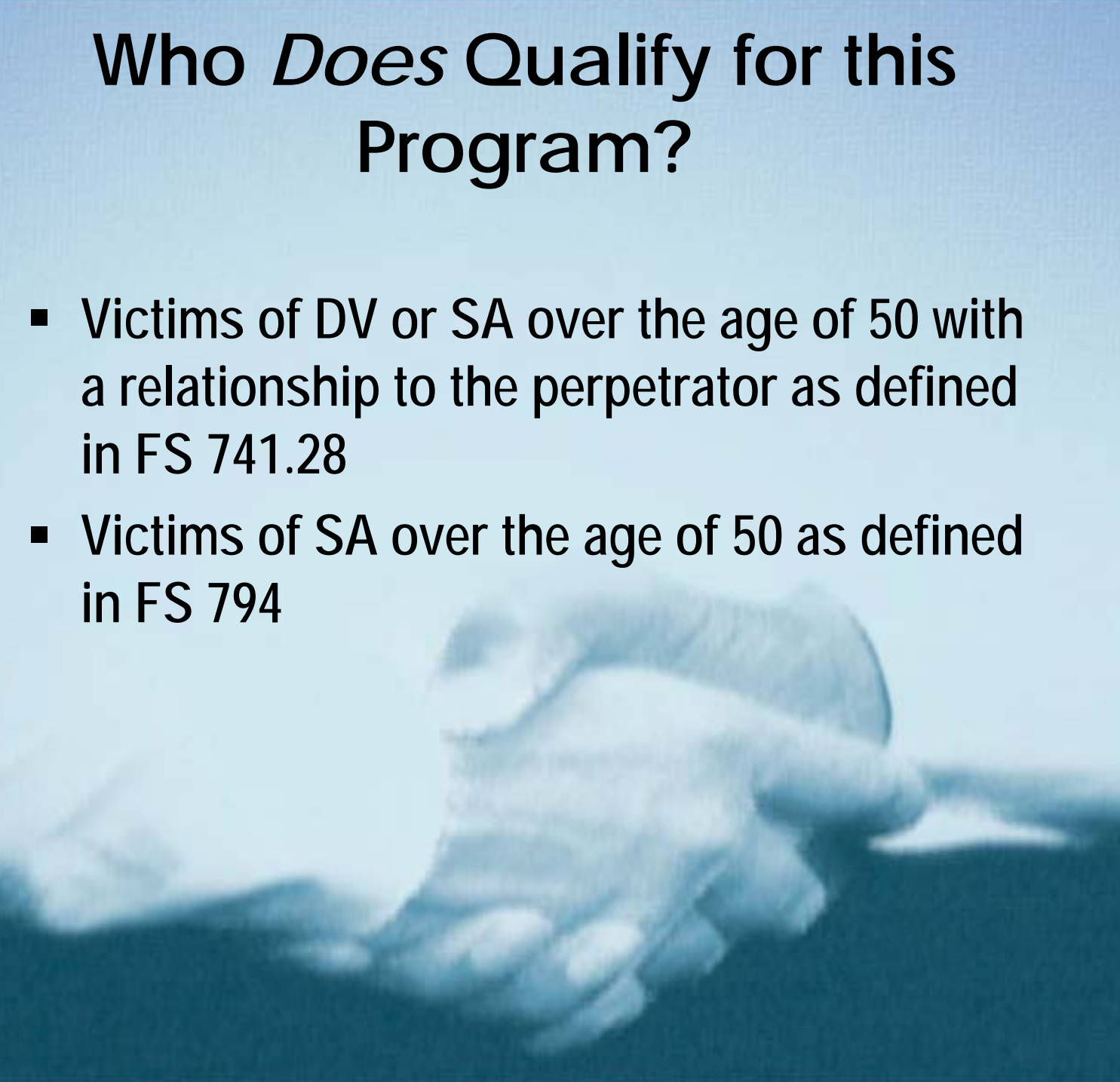
Elderly Persons as Defined in FS 825

- A person 60 years of age or older...
- who is suffering from the infirmities of aging as manifested by advanced age or organic brain damage, or other physical, mental, or emotional dysfunctioning...
- to the extent that the ability of the person to provide adequately for his/her own care or protection is impaired



Who *Does* Qualify for this Program?

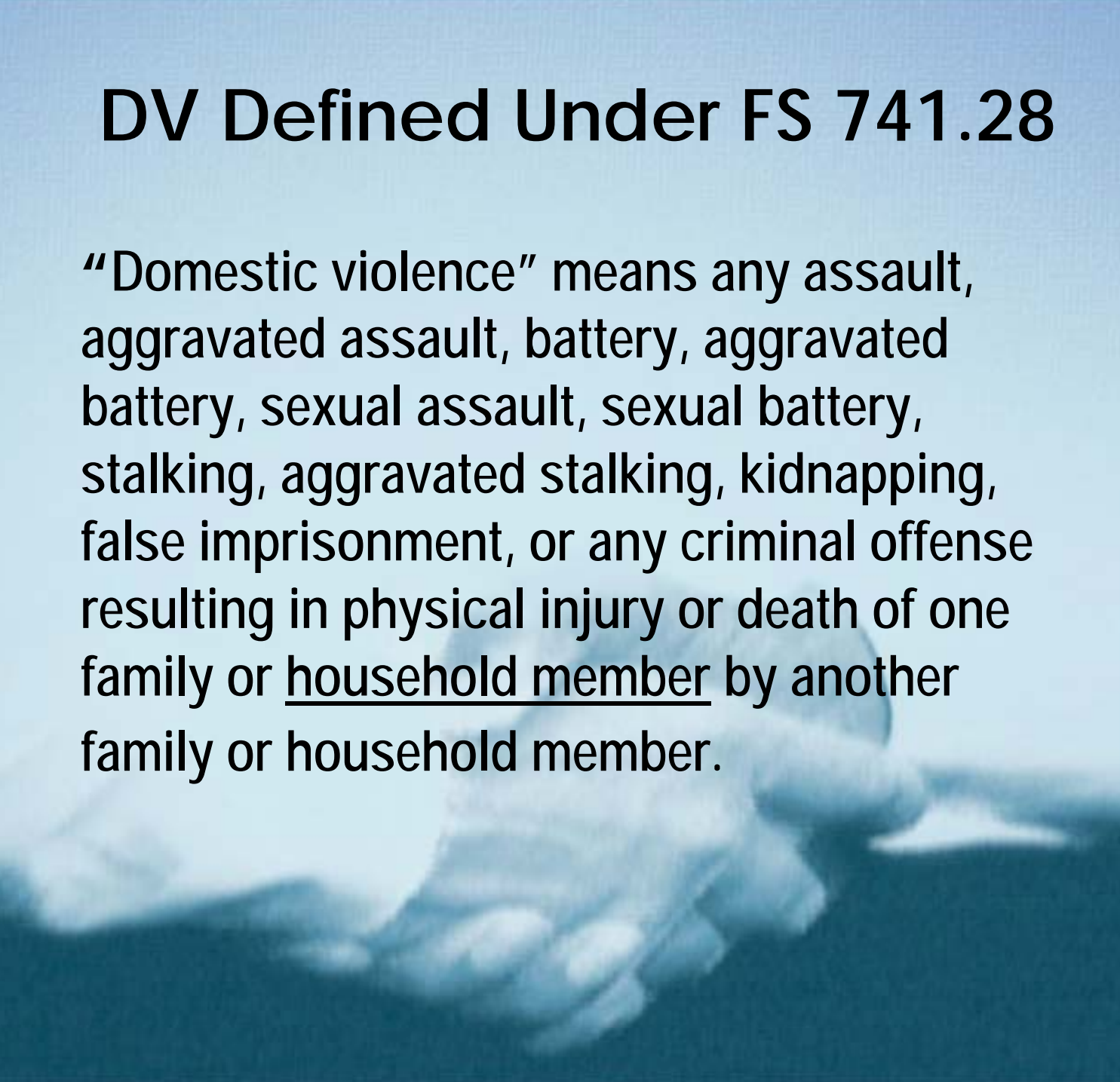
- Victims of DV or SA over the age of 50 with a relationship to the perpetrator as defined in FS 741.28
- Victims of SA over the age of 50 as defined in FS 794





DV Defined Under FS 741.28

“Domestic violence” means any assault, aggravated assault, battery, aggravated battery, sexual assault, sexual battery, stalking, aggravated stalking, kidnapping, false imprisonment, or any criminal offense resulting in physical injury or death of one family or household member by another family or household member.





Family/Household Member Defined

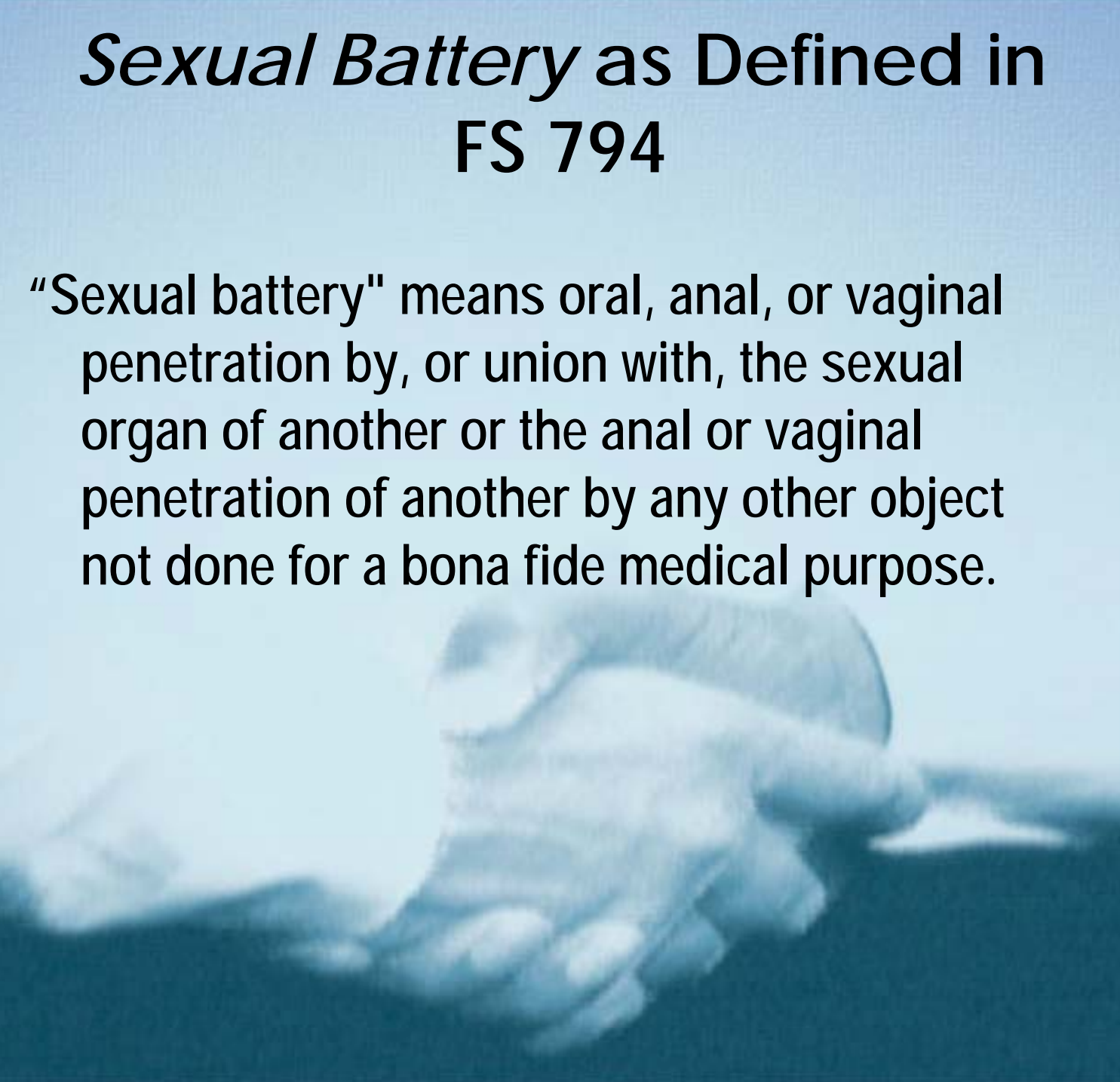
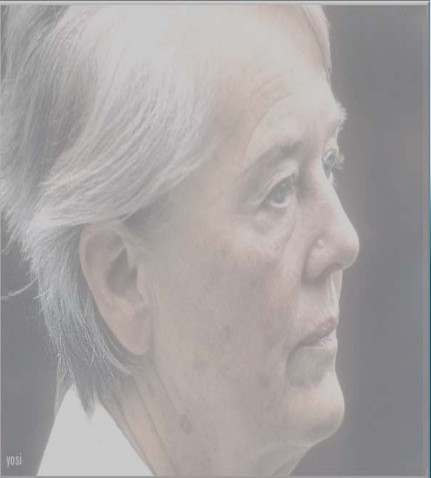
- Spouses, former spouses,
- persons related by blood or marriage,
- persons who are presently residing together as if a family or
- who have resided together in the past as if a family, and
- persons who are parents of a child in common, whether or not they have been married

The family or household members must be currently residing together or have in the past resided together in the same dwelling unit.

- **Exception: persons who have a child in common**

Sexual Battery as Defined in FS 794

“Sexual battery” means oral, anal, or vaginal penetration by, or union with, the sexual organ of another or the anal or vaginal penetration of another by any other object not done for a bona fide medical purpose.



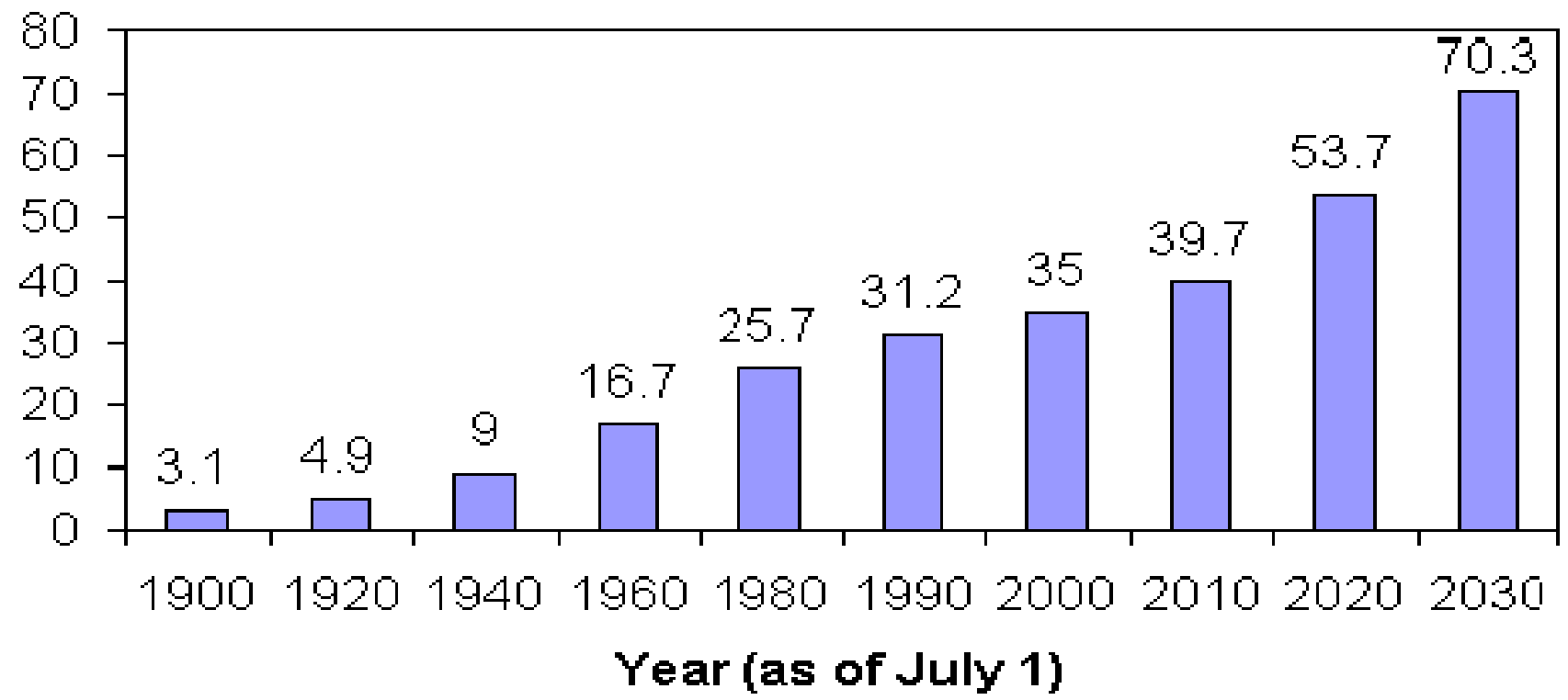
The Aging of America

- The older population was 35 million in 2000, an increase of 3.7 million or 12% since 1990
- One in every eight persons is an older American
- Persons reaching age 65 have an average life expectancy of an additional 17.9 years
- The 85+ population is projected to increase from 4.2 M in 2000 to 8.9 M in 2030
- There were 50,545 persons aged 100 + in 2000



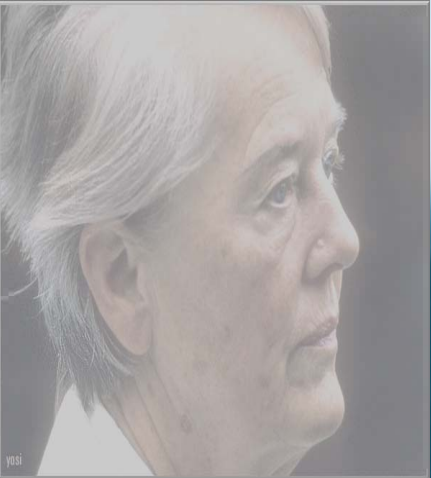
Baby Boomers Come Of Age

**Figure 1: Number of Persons 65+,
1900 - 2030 (numbers in millions)**



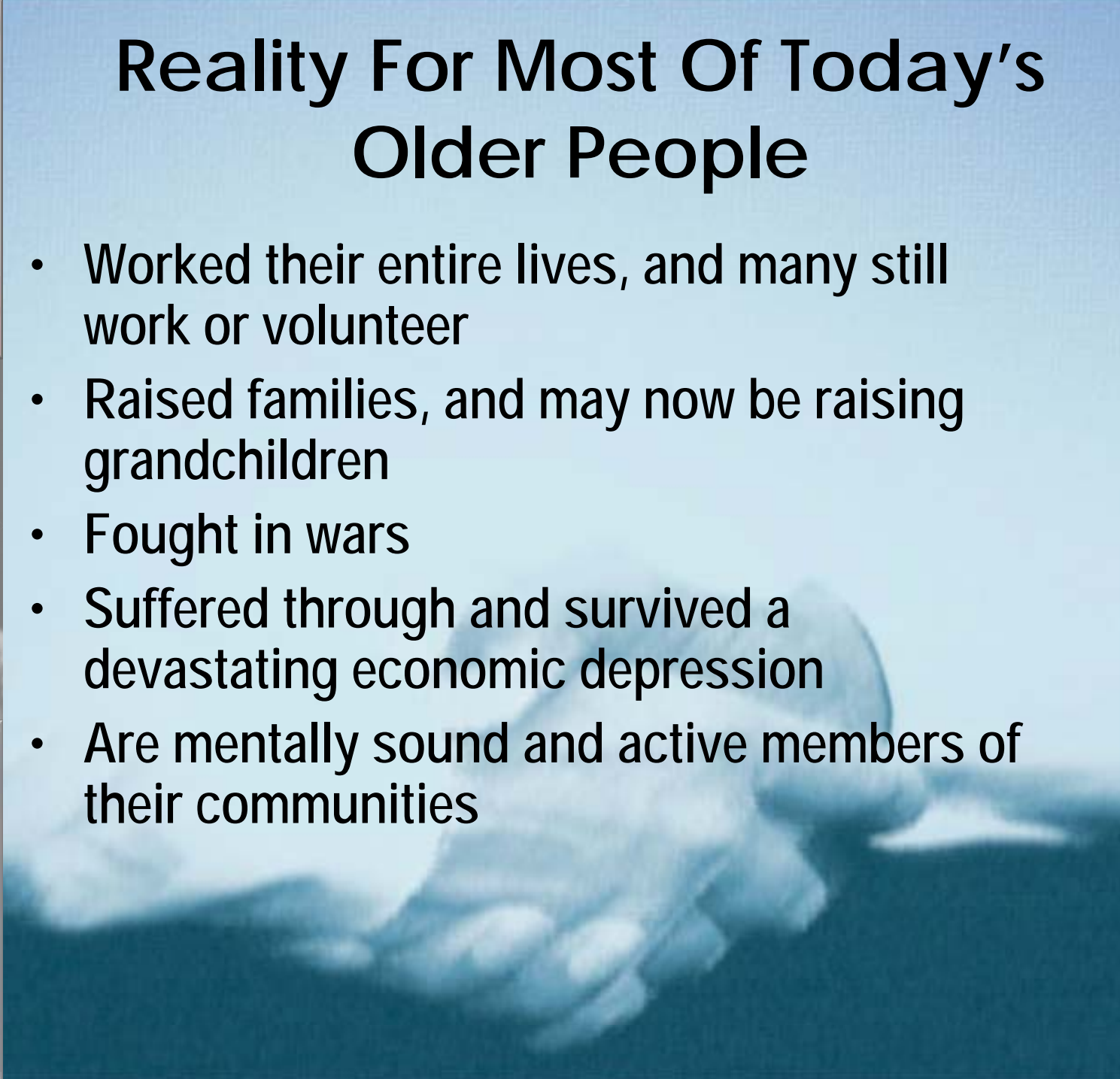
The Aging of Miami-Dade County

- From 1999 to 2004, the number of people age 60+ increased more than 14%, from 376,354 to 430,259.
- In 2004 there were 91,309 people age 60+ who are caregivers for other elders (at high risk for abuse)
- In 2004, only 4% lived in institutional settings; the remainder lived independently in the community
- In 2004, less than 11% of elders suffered from Alzheimer's Disease
- In 2004, only 8.3% of people age 60+ had 2 or more disabilities that included a self-care limitation



Reality For Most Of Today's Older People

- Worked their entire lives, and many still work or volunteer
- Raised families, and may now be raising grandchildren
- Fought in wars
- Suffered through and survived a devastating economic depression
- Are mentally sound and active members of their communities



Understanding Domestic Violence, Sexual Assault in Older Adults vs. Elder Abuse





The Problem

“Battered older women are a silenced and invisible group. They are silenced by ageist assumptions about them as too resistant and hopeless to change or made invisible by the notion that very frail elders are the only victims of elder abuse. Women over 50, abused by partners...are not accurately perceived and consequently not adequately helped by current domestic violence or elder abuse system.”

Seaver, C (1996). “Muted Lives: Older Battered Women.” Journal of Elder Abuse and Neglect, 8(2):3-21.

Become Aware Of Your Own Aging Biases

- Recognizing your own perceptions, biases & attitudes toward old age will help you be more objective when you encounter older persons
- Being aware of & eliminating stereotypes is the first step in obtaining the truly objective facts of a situation
- Justice, medical and social service professionals should avoid being influenced by these negative images or stereotypes



DV/SA vs. Elder Abuse

- The difference may often be artificial
- Challenge the assumption that an adult child who abuses an parent *or...*
- An elder caregiver who abuses a care recipient are not engaged in the same power and control dynamics of DV.
- Some of the confusion comes from separate laws
- Some of the confusion comes from separate service systems



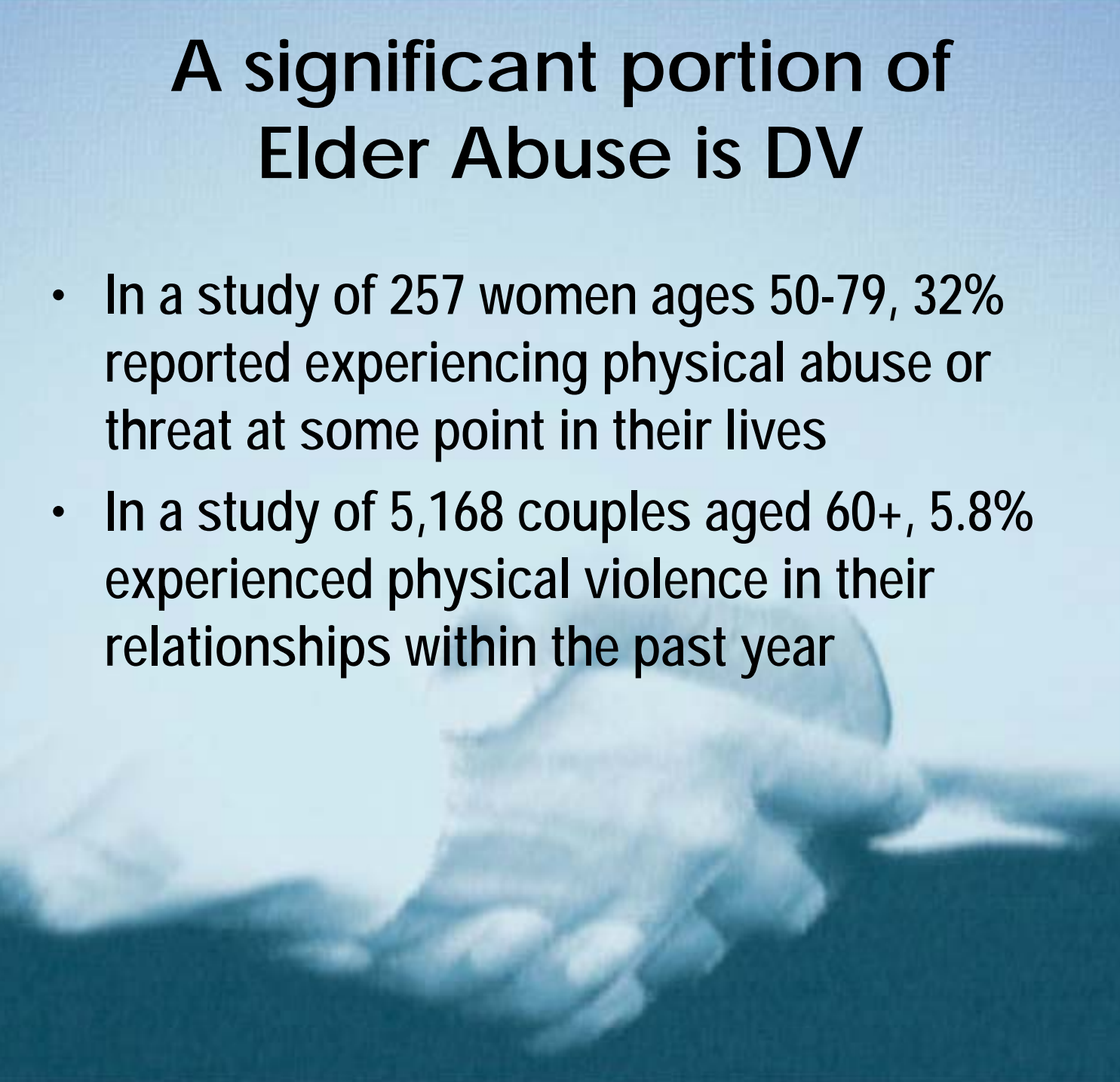


What Older Women Said

- No help available for women their age
- Help was not available for someone who “only” experiences emotional abuse
- Emotional abuse is as bad or worse than physical abuse
- Immigrant women said that help-seeking is especially difficult due to citizenship status and not understanding available options
- Many are concerned for their abusers

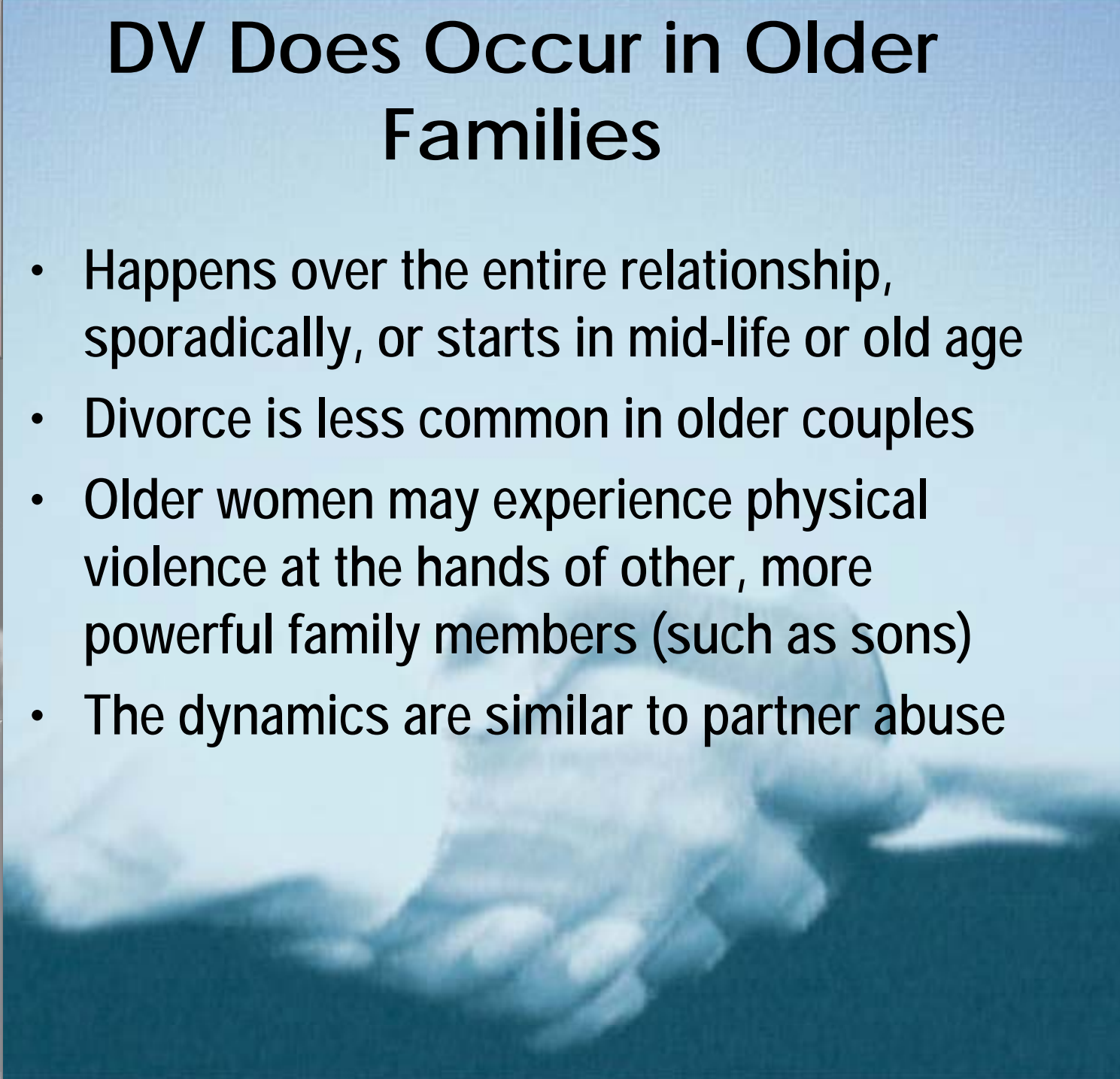
A significant portion of Elder Abuse is DV

- In a study of 257 women ages 50-79, 32% reported experiencing physical abuse or threat at some point in their lives
- In a study of 5,168 couples aged 60+, 5.8% experienced physical violence in their relationships within the past year



DV Does Occur in Older Families

- Happens over the entire relationship, sporadically, or starts in mid-life or old age
- Divorce is less common in older couples
- Older women may experience physical violence at the hands of other, more powerful family members (such as sons)
- The dynamics are similar to partner abuse



Sexual Abuse Does Occur in Later Life

One study of women over 65 years of age:

- 29% of perpetrators were spouses/partners
- 39% were sons, 7% were brothers
- in 71% of cases, other service providers suspected sexual abuse was occurring



Family Violence In Later Life: Power and Control



Traditional DV Model

- Abusers want to have the power and to control the actions of the victims
- Abusers, usually men, believe they deserve unquestioned obedience
- They harm older adults to exercise power and control over them
- Want to be feared, respected and “in charge”
- Feel entitled to use any means necessary to achieve their goal



Domestic Abuse and Barriers to Help-Seeking

Related factors:

- Spirituality
- Isolation-Jealousy
- Shame and Self-Blame
- Protecting Family and Children
- Coercion Intimidation and Fear
- Trapped, Dependent and Powerless



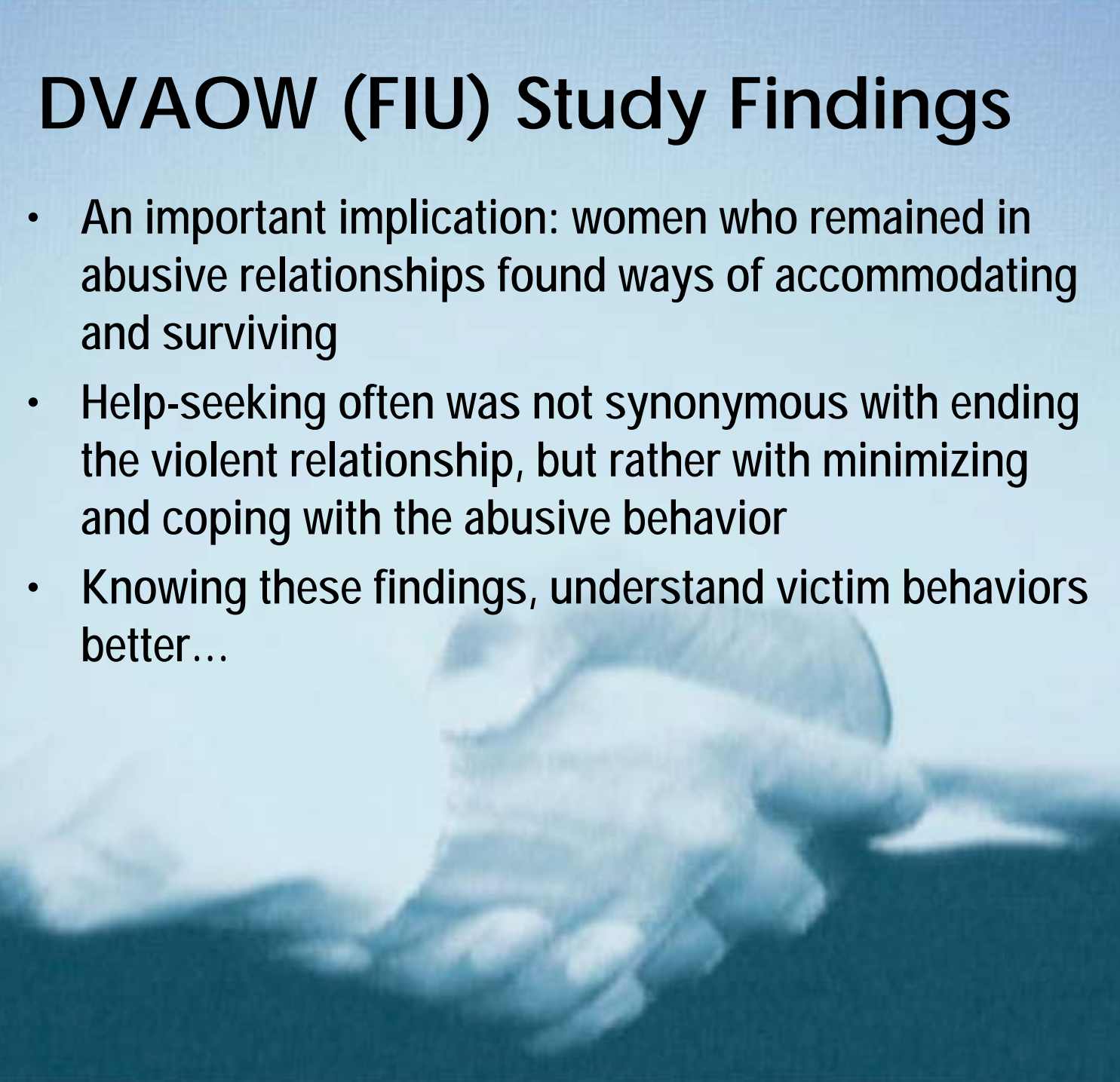
More Barriers Related to Help-Seeking

- Secrecy
- Resignation-Hopelessness,
- Concern for Abuser
- Justice System Response



DVAOW (FIU) Study Findings

- An important implication: women who remained in abusive relationships found ways of accommodating and surviving
- Help-seeking often was not synonymous with ending the violent relationship, but rather with minimizing and coping with the abusive behavior
- Knowing these findings, understand victim behaviors better...





Common Victim Behaviors

- Feel ashamed
- Blame themselves for the abuse
- Protect the abuser
- Remain silent
- Ask professional to leave and/or refuse services
- Minimize or deny abuse
- Want to talk to someone
- Seek short-term police/court intervention



Professional Response

- *Don't automatically refer woman over age 60 as elder abuse*
- *Ask questions to determine if DV*

When professionals miss DV, potential consequences:

- Nothing may be done to end the violence and abuse
- The potential victim is left without hope in a dangerous situation that could escalate
- The victim may be further isolated
- Older victims may not have the personal resources to start over...
- May need help to stay but increase safety



Working with Older Victims of DV

- Do not assume stress or poor family communication are causing the problem
- Assume it is power and control unless/until proven otherwise
- Focus on victim safety; avoid colluding with abuser
- Treat older victims as adults with respect, kindness.
- Acknowledge how difficult it is when victims are abused by an adult child.
- Acknowledge how difficult it must be to consider ending a 30, 40 or 50-year relationship.



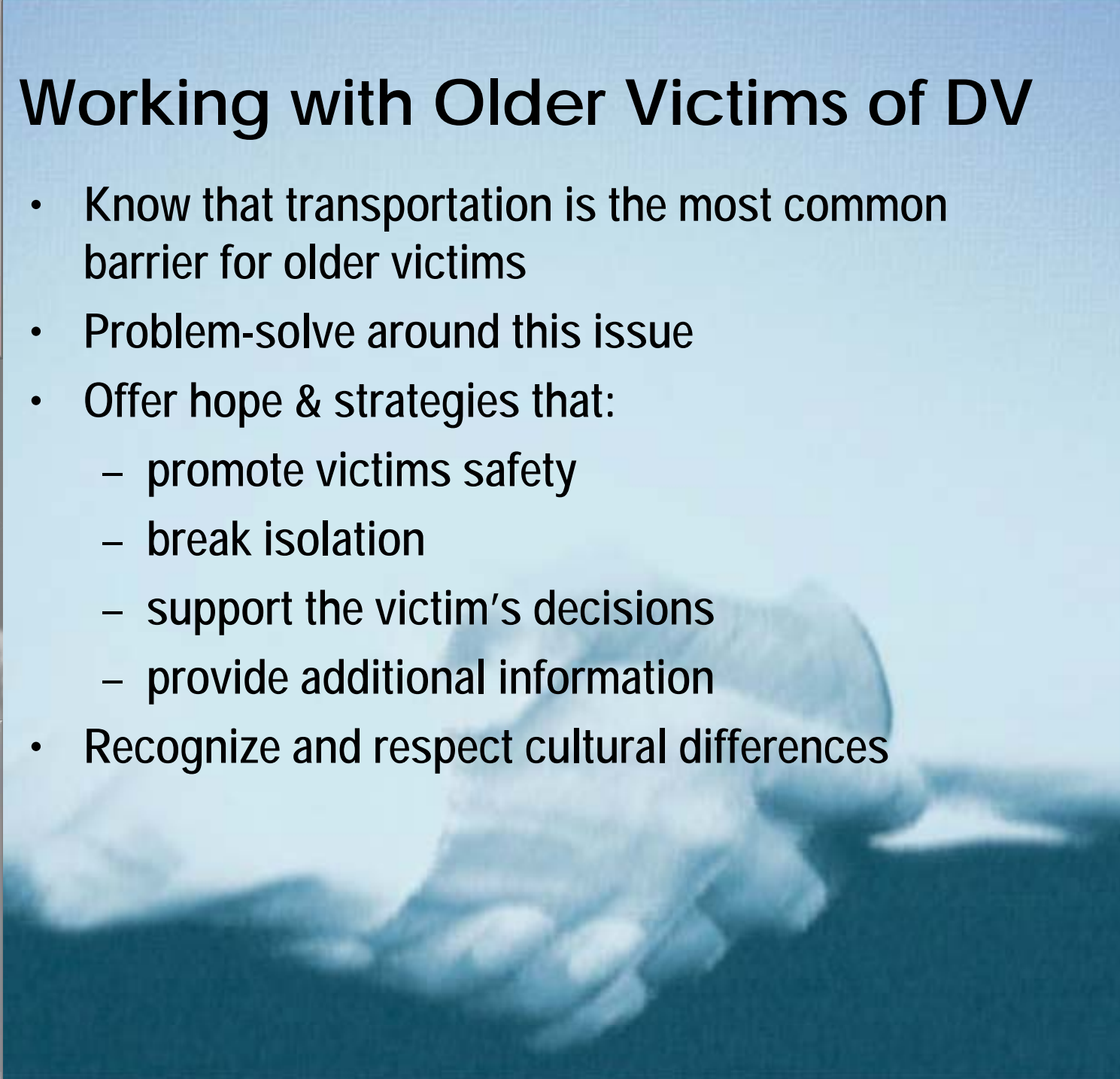
Working with Older Victims of DV

- Older victims may not have the words to describe the abuse they have suffered
- Asking about sexual abuse or marital rape may not result in a positive response
- Ask if they have ever been forced to perform sexual acts that they are not comfortable with, may be easier for the victim to understand and respond
- Many older women are either raising grandchildren or providing care for an elderly parent or spouse/partner
- Ask if there is anyone for whom she provides care



Working with Older Victims of DV

- Know that transportation is the most common barrier for older victims
- Problem-solve around this issue
- Offer hope & strategies that:
 - promote victims safety
 - break isolation
 - support the victim's decisions
 - provide additional information
- Recognize and respect cultural differences

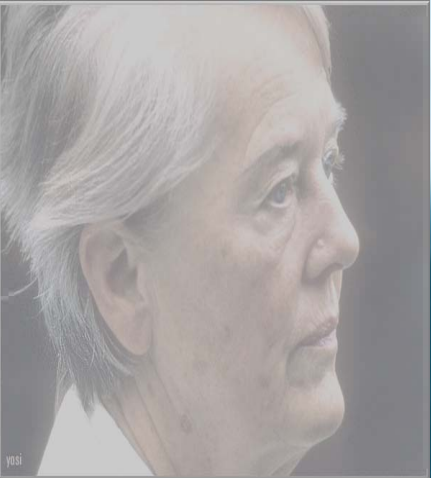


Working with Older Victims of DV

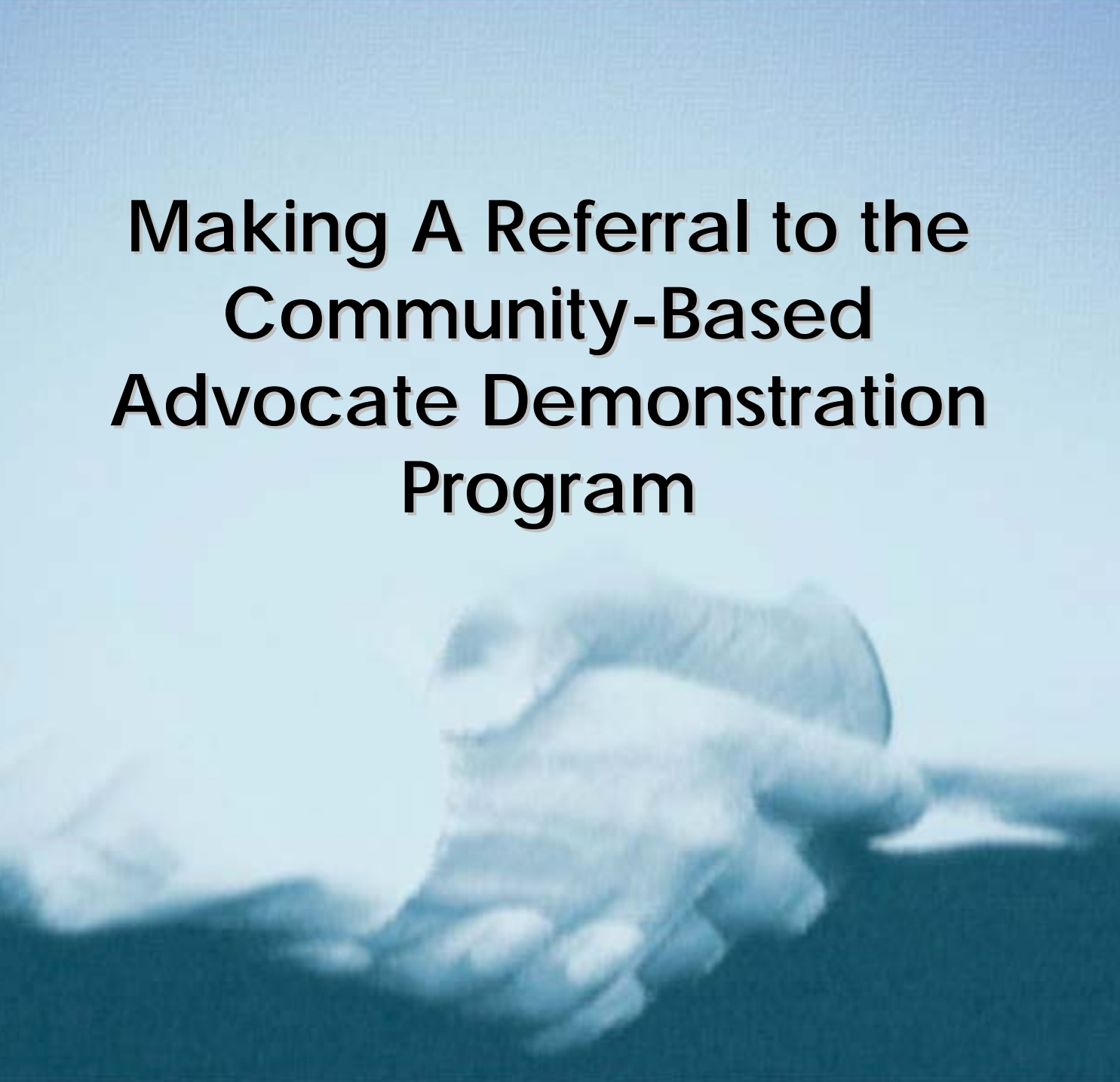
Recognize:

- Victim may want to maintain the relationship and get help for the abuser
- May have tried to get help unsuccessfully & may not trust workers or the system
- Give accurate information about services.
- Do not promise more than you can deliver.
- Provide information about available services outside of your particular system
- Refer to CBA project



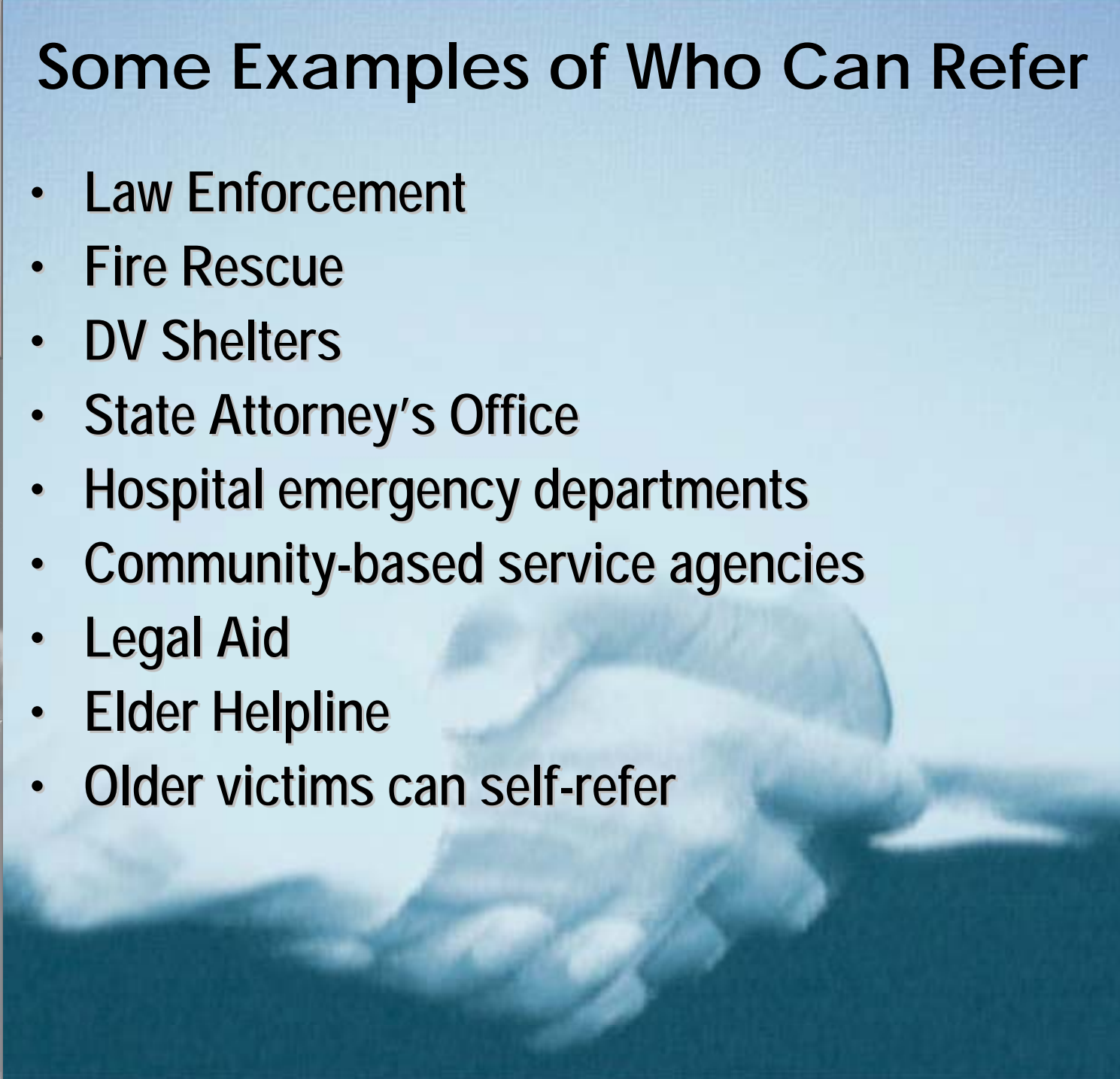


Making A Referral to the Community-Based Advocate Demonstration Program



Some Examples of Who Can Refer

- Law Enforcement
- Fire Rescue
- DV Shelters
- State Attorney's Office
- Hospital emergency departments
- Community-based service agencies
- Legal Aid
- Elder Helpline
- Older victims can self-refer



Who Qualifies for the Program?

Clients must:

- Be age 50 or older
- Be victims of DV or SA
- Fit statutory definition of DV (741) or SA (794)
- *Not* meet criteria for inclusion under elder abuse statutes (825)
- Be willing to be referred



Services Provided

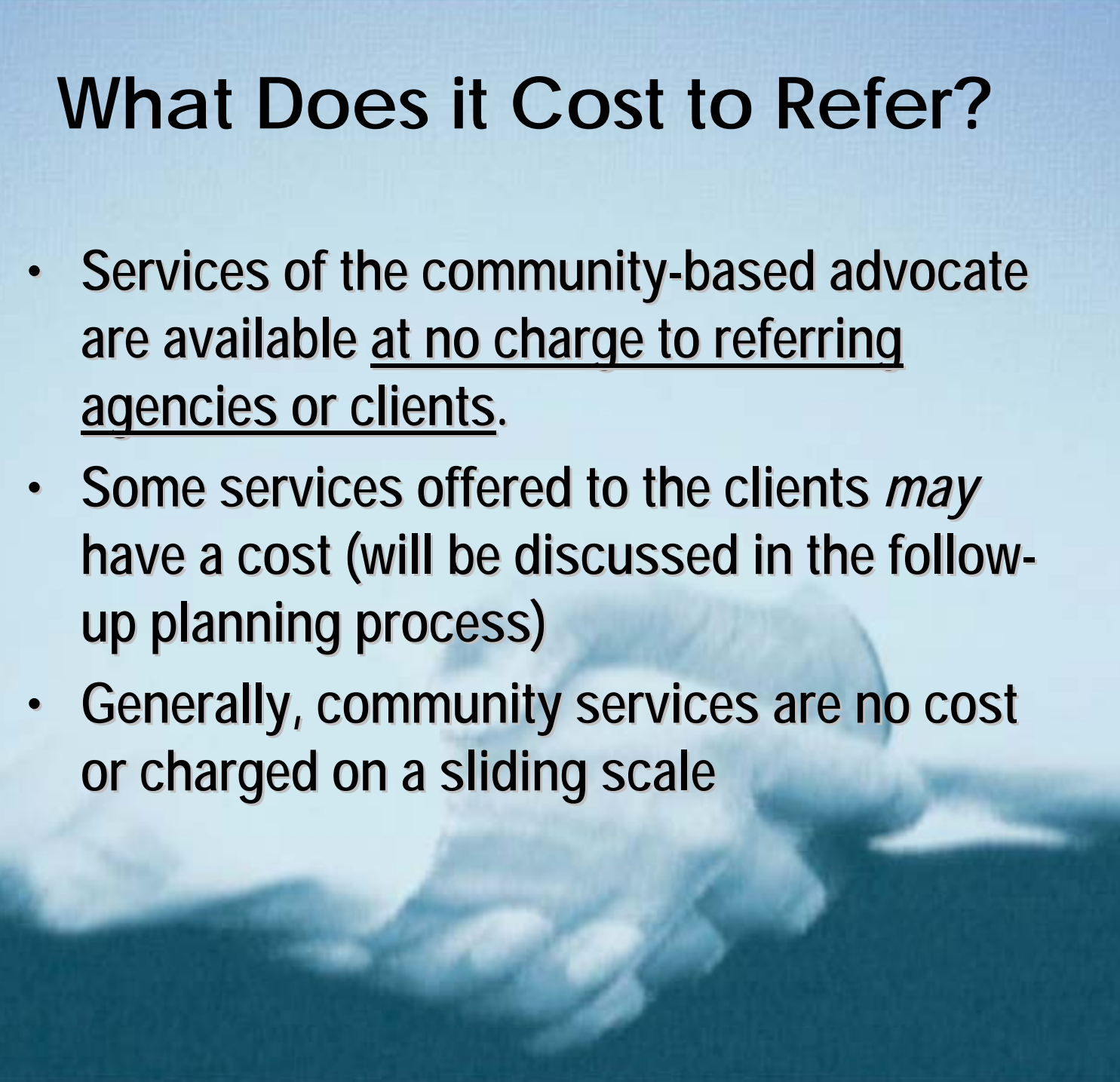
- Independent victim advocate/short-term case manager who works across service systems and specialized programs
- Assessment
- Safety planning
- Follow-up plan and referrals
- Shelter, if desired
- All participants will be screened for mental health concerns
- Referred to U of M Women's Mental Health Program, if appropriate





What Does it Cost to Refer?

- Services of the community-based advocate are available at no charge to referring agencies or clients.
- Some services offered to the clients *may* have a cost (will be discussed in the follow-up planning process)
- Generally, community services are no cost or charged on a sliding scale



Consent to Participate

- This is a demonstration project with an evaluation, so consent is necessary
- Agencies must obtain verbal consent from “victim” for referral to the program
- Identify safe way for victim to be contacted by the CBA; include this info
- Advise victim how they can reach the CBA
- Offer program brochure when available
- CBA will obtain written consent when client is enrolled





It's Easy to Refer

- Preferably while the victim is present call
305-693-1170

(This number is for the DV shelter, The Lodge)

- Indicate you are calling to make a referral to the Older Victims' Advocate
- This line is staffed 24/7
- Let victim speak directly to project
- Give the victim privacy to continue the call

Follow-up

The CBA will never discuss client details with referring agency (confidentiality)

The referring agency will receive the following notifications:

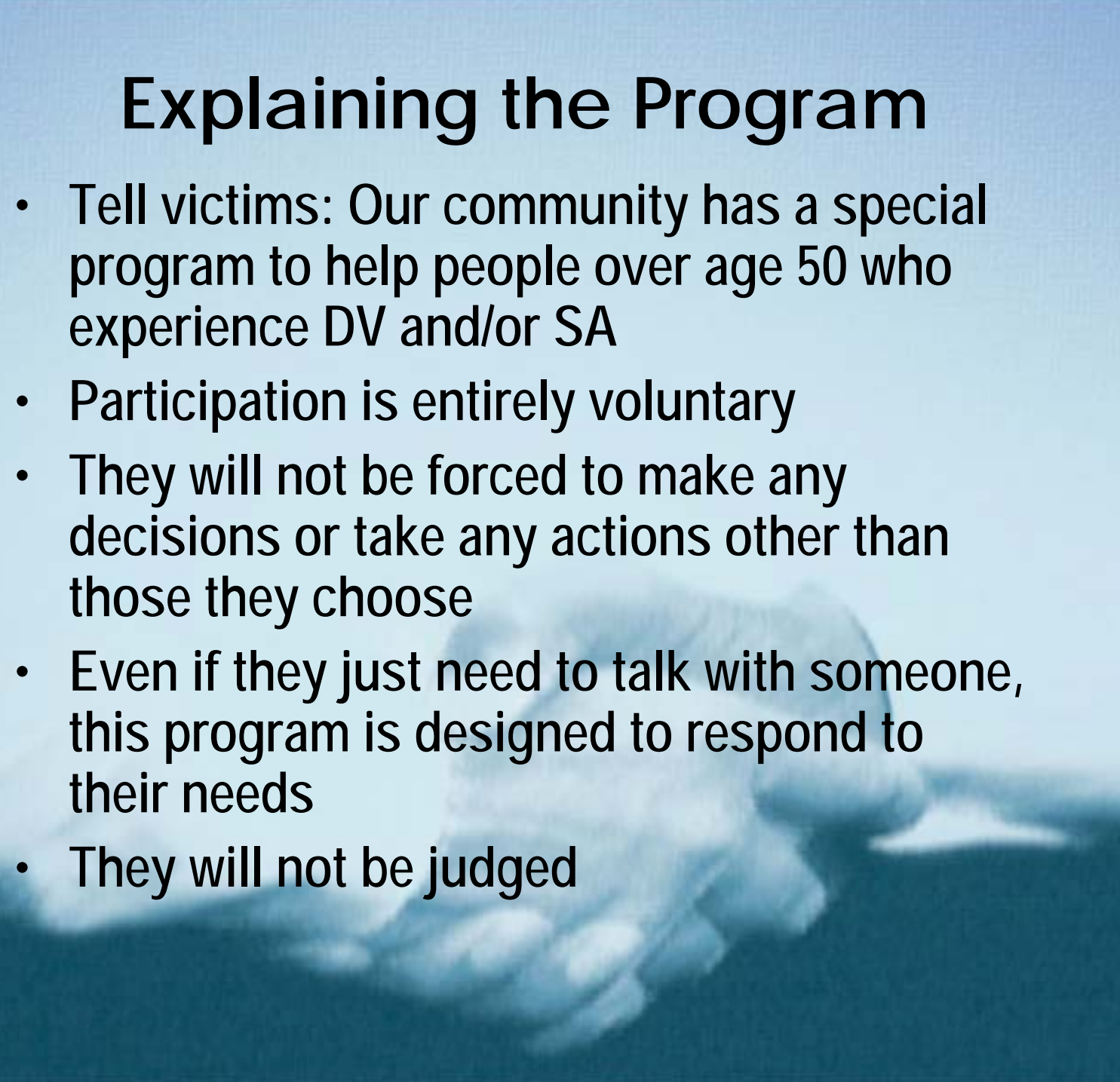
- If a referred client never reaches the CBA
- If a referred client refuses to participate in the project
- If a referred client is being discharged from the project





Explaining the Program

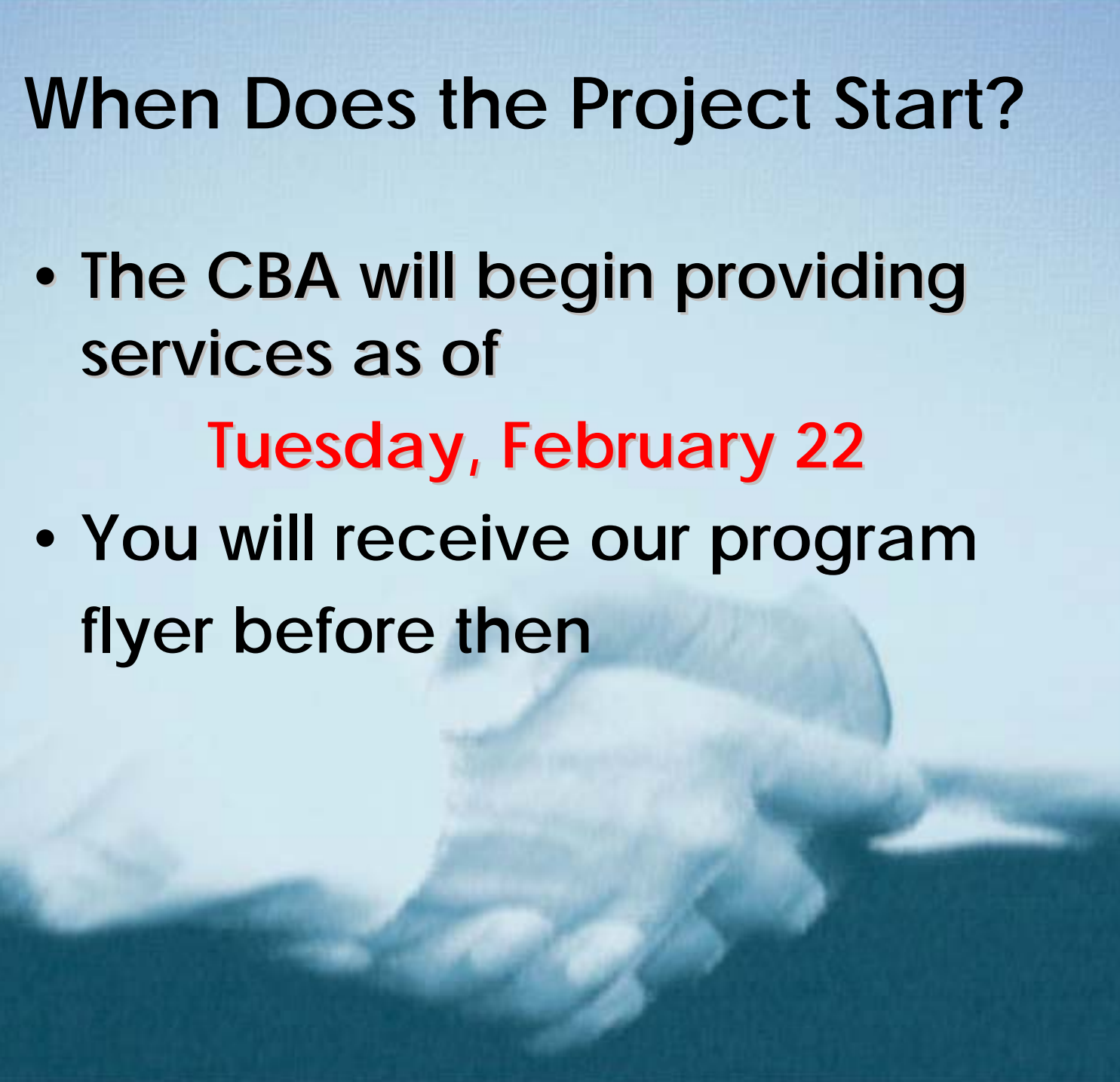
- Tell victims: Our community has a special program to help people over age 50 who experience DV and/or SA
- Participation is entirely voluntary
- They will not be forced to make any decisions or take any actions other than those they choose
- Even if they just need to talk with someone, this program is designed to respond to their needs
- They will not be judged





When Does the Project Start?

- The CBA will begin providing services as of
Tuesday, February 22
- You will receive our program flyer before then



Getting Your Agency Ready to Refer

- Obtain any required internal approvals from your agency to make a referral
- If you need assistance with explaining the project to your agency or with establishing internal procedures that will allow you to make referrals...
 - Contact Sharon Denaro at The Advocate Program, Inc: 305-704-0200.

