Elder Abuse – the Forgotten Family Violence Issue

Submission to the Royal Commission into Family Violence

May 2015

Produced and endorsed by member organisations of the

EASTERN ELDER ABUSE NETWORK (EEAN)

EEAN is auspiced and supported by the Eastern Community Legal Centre
Suite B, 7 Floriston Rd, Boronia, 3155

Submission by the Eastern Elder Abuse Network c/- Eastern Community Legal Centre, May 2015
## Elder Abuse – the Forgotten Family Violence Issue

### CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submission endorsement</td>
<td>4</td>
</tr>
<tr>
<td>About Eastern Elder Abuse Network</td>
<td>4</td>
</tr>
<tr>
<td>Elder abuse – a serious problem</td>
<td>5</td>
</tr>
<tr>
<td>The challenges of placing elder abuse within traditional family violence frameworks</td>
<td>5</td>
</tr>
<tr>
<td>Dementia – a golden opportunity</td>
<td>5</td>
</tr>
<tr>
<td>Lack of awareness by G.P’s</td>
<td>6</td>
</tr>
<tr>
<td>Carer stress – a common factor</td>
<td>6</td>
</tr>
<tr>
<td>Ageism – an age old problem that needs a long term solution</td>
<td>7</td>
</tr>
<tr>
<td>The good news – things are happening</td>
<td>7</td>
</tr>
<tr>
<td>Recommendations</td>
<td>8-9</td>
</tr>
</tbody>
</table>
1. SUBMISSION ENDORSEMENT

This submission is submitted and endorsed by the Eastern Elder Abuse Network reference group, which represents approximately 60 professional member organisations, including:

- Aged Care & support services
- Hospitals
- Police
- Legal organisations (both private and public)
- Faith-based services
- Local government (Aged & Disability departments)
- Ethno-specific agencies
- Dementia-related organisations

The key points of this submission have also assisted with submissions to the Royal Commission into Family Violence by:

- the Law Institute of Victoria, and
- Seniors Rights Victoria

2. ABOUT EASTERN ELDER ABUSE NETWORK (EEAN)

The Eastern Elder Abuse Network (EEAN) was established in 2010 by the Elder Abuse Prevention Project, auspiced by the Eastern Community Legal Centre.

The network has steadily grown to approximately 100 organisational members, representing over 50 organisations in the eastern metropolitan region, all of whom provide services and support for older people.

The network is supported by funding from Seniors Rights Victoria, Inner East Medicare Local and the Inner East Primary Care Partnership.

Members rely on the network for professional development, sharing of information and collaborating with elder abuse cases.

Discussion at meetings has often focused on the need to get elder abuse “on the map” of state and federal governments and did not hesitate to take up the opportunity to submit to the Royal Commission into Family Violence in the hope that this could be achieved in some measure.

EEAN is the largest elder abuse network of its kind in Australia and is affiliated with the national Older Person’s Legal Service network.
3. ELDER ABUSE – A SERIOUS PROBLEM

- By 2050 the number of Australians aged 65 and over will double.
- 6% of older Australians experience some form of elder abuse. This equates to approx. 180,000 people at this very minute.
- Most elder abuse is never disclosed or reported.
- Over 6,000 older people seek assistance through help lines across Australia each year (National Elder Abuse Annual Report 2013-14). This number is growing.
- Causal factors, such as drug use by adult children (particularly ICE), skyrocketing house prices and the high cost of aged care, are expected to exacerbate the prevalence of elder abuse over the next few years.

As far back as 2007, Chief Executive of National Seniors, Michael O’Neill said “these figures are just the tip of the iceberg, with up to five times as many cases of abuse and neglect going unreported”. (The Age October 1, 2007)

4. THE CHALLENGES OF PLACING ELDER ABUSE WITHIN TRADITIONAL FAMILY VIOLENCE FRAMEWORKS

Elder abuse was not included in the original terms of reference for the Royal Commission into Family Violence, and is mentioned only once in the Issues Paper.

Elder abuse is acknowledged as a form of family violence and, for the most part, falls under the Family Violence Protection Act 2008. Yet, elder abuse is rarely mentioned in family violence reports, training manuals, family violence service plans or other literature.

Traditionally (and perhaps rightly) family violence services focus on women and children. For victims of elder abuse (and their families) this presents a number of challenges…….

- most elder abuse is perpetrated by adult children (rather than intimate partners)
- almost half of the abusers are women
- about one third of the victims are men
- victims are often reliant on the abusers for their care
most elder abuse is financial, psychological / emotional or neglect (rather than physical or sexual)

Furthermore, traditional family violence services operate from a feminist framework and apply a gendered lens in their approach to their work. This compounds the challenges that these services face when dealing with elder abuse. Very few services provide support for perpetrators and almost none provide direct support for men.

Men’s support services generally concentrate on change-behaviour programs or counseling, which are not relevant to older men who are victims of elder abuse, most of whom are from a culture of “keeping quiet” about their personal problems, particularly outside the family.

Nor do most older people perceive abuse from their adult children as “family violence” and will choose instead to shield, protect and in some cases, enable, the abuse.

The absence of age-specific services for older people experiencing elder abuse means that the abuse will continue to go unnoticed, unreported and unaddressed. This is a significant gap in the government’s response to family violence.

5. DEMENTIA – A GOLDEN OPPORTUNITY

By the year 2050 the number of older people with dementia is expected to triple. This statistic is likely to have a significant effect on the amount of elder abuse that occurs as a result.

As people with dementia become increasingly forgetful or confused they become easy prey for opportunistic family members, friends, carers or neighbours who covet their financial assets.

It is common knowledge that enduring powers of attorney documents, property transfers, wills, cheques, loan applications and other financial documents have been signed by older people in the early stages of dementia, unaware that they are being tricked, defrauded or manipulated into giving away their financial security.

Very often the people who witness these documents, such as bank personnel or lawyers, are either unaware of the dementia or unsure of how to manage the situation or where to refer the matter.

In cases of physical or sexual abuse of an older person with dementia, police officers are hamstrung by being unable to take statements from a person with dementia. They
are further hamstrung through lack of training in elder abuse and lack of awareness of appropriate referral options.

3. **LACK OF AWARENESS BY G.P’S**

In many cases a G.P. is the only person that someone experiencing elder abuse will disclose to. Yet they receive almost no professional development training on this issue and remain largely unaware of referral options.

A disturbing case in the eastern metropolitan region involved a 78 year old woman experiencing sexual abuse at the hands of her husband who had Alzheimer’s Disease. When encouraged to speak to her G.P, he advised her that this was common and that in any case men with this disease who are exhibiting these behaviours usually pass through this stage “in a year or so”. No support or referral was offered.

EEAN members report that they receive very few referrals from G.P.’s. The regional elder abuse advocate has received none in almost five years.

4. **CARER STRESS – A COMMON FACTOR**

Because most abusers are adult children, upon which the older person is reliant for their care and/or their social and family interaction, a punitive or retaliatory approach is seldom the appropriate response. Inevitably, it causes extreme stress and anxiety for the older person.

Statistics show that very few older victims resort to intervention orders, prosecutions or police involvement in order to mitigate abuse by their close family members.

Caring for an older person with high health needs and/or dementia issues can be challenging and in some cases the carer needs as much support as the older person.

Long waiting lists for respite and other forms of support further add to the carer-stress syndrome that can be a mitigating factor in cases of elder abuse. Responses to elder abuse needs to be sensitive to family relationships and inter-dependence, and ultimately to the wishes of the older person, who may choose to remain in a situation that others may deem unsatisfactory.

Strategies need to include a whole-of-family approach, one which is delivered by specially trained support staff who understand the specific needs of older people and their families and/or carers.
5. AGEISM – AN AGE OLD PROBLEM THAT NEEDS A LONG TERM SOLUTION

There is no doubt that ageism is one of the fundamental social determinants of elder abuse.

Ageist attitudes and behaviors cause older people to feel less valued, burdensome and intimidated. Ageist attitudes and behaviors also allow the younger person to feel a sense of righteousness, entitlement and/or control in ways which can easily turn into elder abuse.

Dr. Simon Biggs (Professor of Gerontology & Social Policy, Melbourne University) believes that an ageist environment “increases the likelihood of extreme negative behavior” towards older people in society (Elder Mistreatment, Ageism & Human Rights – International Psychogeriatric Ass. 2013).

The tendency for adult children to take over their ageing parents decision-making and lifestyle choices in the belief that they know what is best for them, is the tip of the iceberg when it comes to older people losing their sense of autonomy and self worth, and predisposes them to being manipulated and controlled and ultimately the victims of elder abuse.

6. THE GOOD NEWS – THINGS ARE HAPPENING!

The Elder Abuse Program based at the Eastern Community Legal Centre has achieved much since its inception almost five years ago, despite very little funding and only one worker. With support from partners such as the Inner East Primary Care partnership, Seniors Rights Victoria and Medicare Local, the program has managed to achieve the following:

- the establishment of the largest elder abuse network in Australia (and the only one of its kind in Victoria)
- the production of two training videos, one of which has won awards both nationally and internationally
- the production of an elder abuse tool kit
- the facilitation of numerous forums for support workers
- extensive professional development training for professionals, including council, police and hospital staff
- the production of a 90 second video for G.P.’s to act as a referral and awareness-raising tool
- the establishment of an electronic case-conferencing facility so that members of EEAN can collaborate and support one another with elder abuse cases
7. RECOMMENDATIONS

A. That age-specific services for elder abuse victims and their families be established as a matter of priority.

This will alleviate the difficulties and barriers associated with referring elder abuse victims and their families to traditional family violence services and provide a point of disclosure for people, other than the victim, to disclose the abuse and seek support for addressing it.

Age-specific elder abuse services and staff could sit within the family violence sector and frameworks and could be auspiced (via state government funding) by community legal centres, community health services or family violence services.

These services would act as an adjunct to Seniors Rights Victoria, based in Melbourne, who are primarily set up to provide services to elder abuse victims only, and who have limited resources to deal with the growing demand for support.

See Point 4 for rationale.

B. That elder abuse remain as a NON-mandatory reporting issue

Elder abuse should remain as a non-mandatory reporting issue, except in cases where physical or sexual harm is being perpetrated, so that the rights, autonomy and wishes of older people to maintain control over their lives and decision-making remains protected.

A mandatory reporting regime would, by necessity, allow intervention and action to be taken on behalf of older people, without their consent and against their wishes.

Age alone cannot be a factor for having those rights removed, regardless of how poor the decision-making or choices of the older person appear to be.

In any case, statistics show that very few older victims resort to intervention orders, prosecutions or police involvement in order to mitigate abuse by their close family members.

C. That Powers of Attorney & Guardianship documents should become registered documents in Victoria

As with Tasmania, and to a more limited degree, New South Wales and Queensland, Victoria should seek to have all Powers of Attorney and Guardianship documents registerable by law to help mitigate the acknowledged
abuse and misuse of these documents by unscrupulous family members and others.

This reform was missed in the recent changes to the Victorian legislation covering these areas, and as a result, the documents continue to be duplicated, improperly witnessed or signed, forged, altered or destroyed without consent or simply lost or forgotten about by the older person.

Registration would help to ensure that the documents can be publicly identified and allow authorities, such as hospitals, banks, lawyers or aged care services to verify any documents or claims that are presented to them.

This is particularly vital in cases where the older person has developed dementia and is vulnerable to exploitation and abuse by their attorneys, who see this as a golden opportunity to profit.

D. Review of the state’s privacy and confidentiality legislation

Many elder abuse victims refuse to disclose or discuss the abuse that they are experiencing, despite professional staff being aware of the abuse. Without the ability to share information in these cases, support services are constrained in their ability to seek assistance from other organisations who would otherwise help, and the abuse inevitably continues unabated.

Professionals are at all times governed by their organizational privacy policies, so collaboration with other support services should not cut across these obligations.

As stated earlier, a mandatory reporting approach is not the answer – instead a sensible, policy-governed sharing of information among services is essential in order to ensure that elder abuse victims receive the support they need.

E. Greater awareness of elder abuse by G.P’s, police, bank staff and lawyers

These are the people who have the capacity to mitigate elder abuse, providing they receive appropriate education and are fully informed as to appropriate response strategies and referral options.

A dedicated awareness-raising and educational program needs to be developed and aimed at these professionals. This will require funding and development of resources.

F. Media campaign across Victoria for the general public

This will need to involve television, newspaper and social media. Most ordinary Victorians do not understand the term “elder abuse” and are unaware of what is involved or how frequently it occurs behind closed doors.

The campaign could also be aimed at long-term attitudinal changes so that ageism is seen as unacceptable in modern society. As well as the general public, specific programs could be developed in schools, similar to the current respectful relationships programs aimed at addressing gender issues.
For further information contact:

Kaz Mackay
Convenor, Eastern Elder Abuse Network