

Violence and abuse against older adults is a neglected issue. Traditionally, (older) age has been considered a protective factor against victimisation; early research into criminal victimisation more broadly reported that older adults were low risk and, as a result, older people have been excluded from the majority of research, policy and practice developments over the last thirty years. This is compounded by generational norms and attitudes, which valued traditional heteronormative gender roles and positioned violence and abuse by men towards women as private family matters. Women aged 60 and over were socialised before the major advancements in women's rights that have included the recognition of violence and abuse as 'domestic abuse', accompanied by a suite of legislation and policy to prevent and address the phenomenon and a more general improvement in equality protections.

The absence of evidence and recognition of violence and abuse against older adults has created significant gaps in both awareness of violence against older women and interventions to prevent perpetration and support survivors. Comic Relief have recognised this gap in services and have, in partnership with the Tampon Tax Fund, funded seven projects across England and Wales (Phase 1, 2019-2020) to pilot projects aiming to raise awareness of violence and abuse against older women, deliver training to professionals, increase referrals through community initiatives and carry out case work with older survivors to improve understandings of needs in order to develop dedicated services. The funding for these projects has now been extended (Phase 2, 2020-2021) to enable this work to be continued and advanced.

Working alongside Comic Relief as an independent Learning Advisor, I have been overseeing the seven projects to identify shared learning opportunities, providing support to the cohort and individual projects through regular telephone discussions, sharing resources, reading drafts of materials and attending events (pre-Covid!) This has been a wonderful opportunity to gain insight into the practical challenges, and opportunities, for responding to violence and abuse of older women. Below are three key areas of shared learning which emerged from Phase 1.

Intersectionality is critical but there are challenges to achieving this

Although the intersections of age and gender are the primary focus of the seven projects, there is a need to cast the net wider and examine the particular issues, impacts and needs of older women from minoritized communities, including older women from black and minority ethnic communities (BAME) and those who identify as LGBT, are part of traveller communities or other minoritized and/or stigmatised groups. This does not just apply to older women of course; all projects working with survivors need to be intersectional in their approach and develop services with other specialist organisations to ensure they are able to reach women from minoritized communities and provide the support required. However, there may be additional challenges to achieving this with older women, primarily:

- A lack of established relationships and referral pathways between age-related charities and stakeholders, and community organisations and charities working with minoritized communities.
- Cultural norms and attitudes intersecting with age creating additional challenges in reporting violence/abuse and/or engaging with communities and individuals at risk.

- Risk assessment and management tools which do not capture the experiences, norms or practices of particular communities.
- Limited awareness raising of violence/abuse within these communities – for example, campaign materials by national and local gender-violence organisations not being diverse and representative of older women from these communities and/or not placed in locations where this cohort is likely to see them.

There is a need for focused training for professionals, but this must be evidence based

Most of the projects included some element of training for professionals, either internally (training for their own staff) and/or externally (training professionals outside of their organisation, typically across local health and safeguarding sectors). The funded partners generally reported good levels of interest from professionals, although some sectors were harder to engage than others (e.g. social care). Nevertheless, resource and time constraints mean professionals have limited capacity to attend training and valued short half or full day sessions rather than longer training courses delivered over multiple days.

Most of the training provided by the funded partners was limited to raising awareness and addressing common myths and misunderstandings about domestic/sexual violence and age. More advanced training is required but a lack of research evidence and data on both national and local levels prevents the development of such training. It is critical that services locally and nationally develop an evidence base which can inform training, to ensure the training has longevity and is suitable for the various audiences.

Older women require much of the same services but delivered differently

Although age can create some additional/specific barriers to reporting or accessing services and, for practitioners, can result in challenges around engagement with older survivors and interventions with perpetrators, violence and abuse of older people is not a distinct phenomenon. Most of the risk factors for violence and abuse transcend age groups and exist across the life-course, and many of the impacts on survivors and their subsequent support needs mirror those in younger age groups. However, older age may mean some services need delivering differently – for example, outreach support (one-to-one and groups), peer awareness raising and referrals, referral pathways with age charities, safeguarding adults and health/social care stakeholders, targeted work with care home providers, and dedicated older adult support groups and refuges.

The Phase 2 projects commenced just as the Covid-19 pandemic took hold, and these funded partners now face additional challenges, but perhaps also opportunities, which could not have been foreseen. While we have all been affected by Covid-19 to some extent, certain groups in society are impacted disproportionately and that includes older people (who may be more likely to contract the disease and suffer more serious adverse effects if they do) and domestic abuse survivors (who may be living with the abuser and forced to isolate, with reduced support services available increasing the risk to survivors). For older survivors of violence and abuse, the risk factors and impacts are likely to be exacerbated by these intersections, with unique implications. For example, older women who were previously receiving regular care visits and/or were involved in adult social care in some capacity may have seen these interactions reduce significantly, meaning opportunities to identify those at risk of abuse and intervene accordingly have been lost. Older people, particularly those who

are abused, may have become more isolated as a result of Covid-19 due to shielding and/or the reduced visits from formal and informal networks (for example family) potentially leaving them vulnerable to abuse and exploitation. Furthermore, the move to deliver support services online is likely to have negative impacts on some older survivors, as older people are less likely than younger people to have internet access and/or be confident using technology (although it is important not to make ageist generalisations about older people's engagement with tech). As services continue to develop and respond to the pandemic and create new innovative ways of working, older people must be considered (and ideally consulted) to ensure this under-recognised group are not pushed even further to the margins of support.

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