

Violence Against Older Women Comic Relief Report April 2020

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Introduction and background

Male violence against women and girls (VAWG) has been described as a global pandemic, with at least 1 in 3 women experiencing some form of physical or sexual violence during their lifetime (World Health Organisation [WHO], 2013). In England and Wales, around 1.6 million women experienced domestic abuse¹ in the previous 12 months (Office for National Statistics [ONS], 2019) and around 650,000 people report experiencing sexual violence, of which around two third are female (ONS, 2017). Despite significant legal and policy developments over the last three decades, particularly across the West, VAWG persists and some evidence indicates it may be increasing. At the time of writing this report, significant concerns have been raised at an international level about the effect of Covid-19 on the incidence of male violence against women (UN, 2020). Several countries have seen increases in reports to helplines, the police or other authorities (UNFPA, 2020) and demand for refuge/shelter for women has intensified. In the UK, the rate of domestic homicide has doubled since the lockdown was imposed on March 23rd 2020 (Grierson, 2020).

Various risk factors for violence and abuse have been identified. Demographic risk factors include being female, having a long-term disability or illness, being a student or unemployed (Smith *et al*, 2011; ONS, 2019). Age has also been identified as a risk factor; women aged 16-24 are considered most at risk of experiencing domestic and sexual violence (Smith *et al*, 2011; ONS, 2019) and older age has generally been viewed as a protective factor against intimate-partner violence, with studies reporting intimate partner violence (IPV) declines with age (Kim *et al*, 2008). Consequently, the majority of research, policy and practice has focused on young women as victims and young men as perpetrators of domestic and sexual violence. In the UK (as elsewhere) both prevention and intervention initiatives have been developed based on the characteristics, lifestyles and needs of young.

However, emerging evidence has cast doubt that (older) age has the protective effect it has historically been believed to have. Attention has been drawn to the limitations of national data on assessing the prevalence of domestic and sexual violence across the life course; until 2017, the primary source of data, the Crime Survey for England and Wales (CSEW) excluded those aged 60 and over from the sampling. Furthermore, although the age-cap was lifted to 74 in 2017, the survey continues to exclude a portion of older adults (aged 75+) and is limited to those living in the community, meaning sexual violence in care homes or other institutions is not captured in the data. Globally, research examining different forms of violence and abuse against older people (located primarily within the 'elder abuse' field) has produced estimates of the extent of violence and abuse that are similar, or in some cases higher, than the rates observed among younger age groups. A recent systematic review and metaanalysis of global 'elder abuse' research reports that at least 1 in 6 older people (aged 60 and over) living in the community experiences some form of violence or abuse each year, most of which is perpetrated by partners or family members and thus falls within the definition of domestic violence in England and Wales (Yon et al, 2017). In England and Wales, this would equate to around 2 million older people each year. This is slightly higher than the reported rates of domestic violence among those aged 16-59 (ONS, 2017). Indeed, some research by campaign organisations has found that those aged 61 and over are more likely to experience abuse by an intimate partner or family member than those aged 60 and under (SafeLives, 2016). Moreover, research on domestic homicides (deaths of adults aged 16 or over by a partner or family member/member of the household) has found that at least 1 in 4 in the UK involve a victim aged 60 and over, despite this cohort accounting for only 18% of the population (Bows, 2019a).

¹ Domestic violence and domestic abuse are used interchangeably in this report

This increase in empirical evidence has raised concerns about the scope and suitability of prevention and intervention responses to violence and abuse against older people. Awareness of violence and abuse in later life is limited; the majority of campaigns are targeted at young adults and campaign materials feature images of young people are both victims and offenders of domestic and sexual violence. There are few training courses for professionals which specifically focus on violence and abuse in later life and most general training and awareness raising on the topics of domestic and sexual violence do not mention older age groups or include case studies of older victims/offenders (Bows, 2019). Some research has found older victims take longer to seek help from support services compared with younger victims (SafeLives, 2016) and when they do, the support available has been designed for younger victims, meaning the service may not be suitable for older adults (McGarry et al, 2011; McGarry et al, 2014). The current risk assessments used by most sectors to identify those at high risk of serious and fatal violence have also been designed to capture risk among young women experiencing abuse by young intimate partners meaning older adults are less likely to be assessed as high risk and are consequently not referred into multi-agency risk management and safeguarding pathways. In fact, older people who do report violence and abuse are less likely to be seen as victims of domestic violence. Action on Elder Abuse Scotland (2019) highlight the tendency for cases of domestic violence to be viewed as 'elder abuse' and consequently dealt with as safeguarding issues; for example in 2017, out of 28,187 adult protection cases involving an older person in England and Wales, only 12% were referred by the police to the CPS. These concerns have been raised elsewhere in the UK. For example, in a review of domestic abuse vs. 'elder abuse' responses in Wales, Wydall and colleagues (2019, p.968) argue that

"there is a risk of diverting older people out of the domestic abuse support framework and into a welfare-centric approach, thereby reducing the ability to use civil and criminal justice options."

They further point out that such a welfare-centric approach can "lead to missed opportunities to explore civil and criminal options more accessible to younger victim-survivors" (Wydall *et al*, 2019, p.970). This has been identified as an issue in relation to domestic abuse risk assessments; emerging evidence in Wales indicates the standard domestic abuse risk assessment tool, Domestic Abuse, Stalking and Honour Based Violence (DASH), often results in lower scoring than might be expected in approximately 1 in 5 cases involving older victims (Older People's Commissioner, 2019), and research has found there is sometimes an unwillingness to use the DASH tool to assess older victims based on ageist assumptions and beliefs and conceptual confusion between 'domestic abuse' and 'elder abuse' (Clarke *et al*, 2012).

Concerns about policy and practice have also been increasingly raised in relation to older offenders, the majority of whom have committed sexual offences against children, adults, or both. Although a significant proportion of older offenders are serving sentences for historic offences, there is also a group of offenders (estimated to constitute between a quarter and a third of older offenders) who have either continued offending in older age or have commenced offending in their later years (Fazel and Grann, 2002). Older offenders pose significant problems for the criminal justice system, which has been designed for younger offenders. Just as age has been considered a protective factor against victimisation, it has been a widely accepted criminological 'fact' that offending peaks in early adulthood and rapidly decreases thereafter, with most adults over 30 desisting from crime (termed the age-crime curve). The system, in particular the prison estate and rehabilitation programmes, have therefore been designed around the characteristics, needs and lifestyles of young (male) offenders, which is having serious consequences as the proportion of older offenders in the criminal justice system (CJS) rapidly increases.

These issues are likely to become more pressing as the general population continues to age. It is predicted that by 2030 over a billion people worldwide – one in every eight of the Earth's inhabitants and almost double the current number – are forecast to be over 65; in the UK, 12 million people are aged 65 or over and this number is projected to increase to over 16 million in the next 20 years (Minocha *et al*, 2013). As empirical evidence reveals significant numbers of older women experience domestic and sexual violence, there is an urgent need to develop policies and services which can respond to this growing phenomenon to both prevent abuse and, where it occurs, ensure that victim-focused and evidence-informed provisions are in place to support victims.

National policy context

At the time of producing this report, violence against women is receiving national political attention and a dedicated Domestic Violence and Abuse Bill is currently before Parliament, which aims to strengthen victim rights and extend legal powers to tackle domestic abuse. In 2010 the then coalition government launched the 'call to end violence against women and girls strategy' which has survived two subsequent governments. Over the last ten years, new criminal offences have been introduced to capture behaviour that is frequently present in cases of domestic violence but which was previously unrecognised in law. For example, the Protection of Freedoms Act 2012 created two new offences of stalking (inserted into the Protection from Harassment Act 1997) which made stalking a specific offence. Police powers to respond to stalking have recently been extended through the Stalking Protection Act (2019), which introduced Stalking Protection Orders (SPO), civil protective orders which, if breached without reasonable excuse, can lead to criminal prosecution. In 2015, a new offence of coercive and controlling behaviour (Serious Crime Act 2015) was added to the statute books in recognition of the widespread prevalence of such behaviours which underpin the majority of domestic violence, but which were previously not captured by criminal law. There have been significant developments in the way domestic violence is responded to across the different stages of the criminal justice system; at a policing level, advances include the introduction of specialist police officers (McMillan, 2015), dedicated Domestic Violence Units and a suite of training for police officers (Westmarland et al, 2018). Additionally, specialist support for victims in the criminal justice system have been introduced including Independent Domestic Violence Advocates (IDVAs), specialist domestic violence courts (magistrates) (Cook et al, 2004) and Domestic Homicide Reviews, which were established on a statutory basis under the Domestic Violence, Crime and Victims Act (2004) and rolled out from 2011; these reviews are conducted whenever there is a death of an adult aged 16 and over who is killed by a person they have been in a relationship with or were a member of the same household to examine the circumstances in which the death occurred with a view to identifying the lessons to be learn from the death (Home Office, 2016).

However, whilst many of these developments have been received positively, there remain significant gaps and issues, particularly in relation to service provision. Between 2010/11 and 2011/12 there was a thirty-one per cent funding cut to domestic and sexual violence services by local authorities, equating to around £2.5 million (Walby, 2012). Despite committing to 'eliminating' violence against women and girls, since 2010 spending on domestic violence refuges has been cut by almost a quarter (Buchan, 2017). Gaps in funding and subsequently, provision, has also been identified for other specialist domestic and sexual violence services. SafeLives (2017) surveyed domestic abuse practitioners and identified significant gaps in all support services, including IDVAs, mental health support, counselling, housing and perpetrator programmes.

Although older women have not been specifically identified as a group requiring particular support, the broader issue of violence and abuse against older people has garnered significant political attention over the last few years as a result of academic research (and increased awareness by campaign organisations. In 2017 the then Home Secretary Amber Rudd declared crimes, including violence and abuse, against older people a priority area and this resulted in a dedicated Home Office

committee and seminar series examining the issue. Consequently, funding to train some frontline domestic abuse services, particularly IDVAs, was announced. An inspection into police responses to older victims of crime was carried out by Her Majesty's Inspectorate for Constabulary in 2017/18 (HMICFRS, 2019) and the Crown Prosecution Service revised their policy on prosecuting crimes against older people following a consultation in 2017-2018 (CPS, 2020). Across the UK, there are a number of ongoing inquiries and consultations on 'elder abuse'. The Law Commission England and Wales are currently consulting on proposals to introduce age as statutory aggravator under the current hate crime frameworks. Similar consultations are ongoing in Scotland, which is also considering whether a standalone criminal offence of 'elder abuse' should be introduced (Bows, 2020) and in Northern Ireland, which is also looking at adding age as a protected characteristic to the hate crime legislative framework.

The VAOW programme

In 2018 Comic Relief commissioned the University of Central Lancashire's Connect Centre for International Research on Violence and Harm to undertake a scoping study of violence against women and girls (VAWG) services. The overall aim of the work was to examine ways in which funding approaches and service provision for VAWG in England and Wales could be improved. A key finding was that older women commonly experience additional obstacles to accessing support services.

Comic Relief consequently undertook a thematic scoping of violence against older women (VAOW), reviewing recent literature and holding thirteen consultation calls with relevant practitioners and academics in the field. Key findings were:

- Violence against older women is not sufficiently understood by service providers in the UK, and consequently, is not well responded to;
- Older female survivors of violence are particularly vulnerable and hard to reach without sufficient knowledge, time and resources, and in the absence of these, the risk of harm is high;
- Very few third sector organisations have been providing targeted services for this group.

These findings indicated that the best contribution a year-long funding initiative could make was to support learning by women's sector service providers about the needs of older women among their service users – by consulting with the women themselves, and other organisations and experts working in this field – before they develop and evaluate service responses over time; or to help existing service providers evaluate and develop the approaches that they are currently taking.

A small, invitation-only funding and learning initiative for UK women's organisations was launched in August 2018 with the intention of increasing knowledge and awareness of older women's experiences of violence and effective sector responses, particularly among specialist service organisations; and to help strengthen and support services that are already being delivered to this group. In February 2019, seven organisations were awarded grants.

The projects

Comic Relief funded seven frontline charities providing specialist domestic and/or sexual abuse services to develop and pilot specific projects addressing violence against older women. The seven projects were funded for a period of 12 months and each had specific aims and objectives, although some common themes cut across the portfolio: training and awareness raising, increasing support provisions for older victims, developing knowledge and understanding, building multi-agency relationships and responses.

Somerset and Avon Rape and Sexual Abuse Support (SARSAS)

SARSAS had previously identified older women as a priority group, as they recognised a gap in service provision and uptake. In particular, at the start of the project, only 10% of service users aged 55+ across South West and 2% over 65 across the region accessing Rape Crisis centres, despite this region have a significant older population. SARSAS therefore wanted to increase responses and develop a service model for older women.

The SARSAS project had three primary objectives/outcomes:

- 1. South West Rape Crisis Centres and organisations working with older women in the SW understand the need and scope of the experience of sexual violence against older women in the South West and are more confident to respond to disclosure of sexual violence by older women and provide appropriate support.
- 2. A raised awareness of the issue of sexual violence against older women across the South West.
- 3. A co-designed service delivery model that focuses on older women survivors is created and ongoing funding to support older women is identified and applied for.

The key activities underpinning these objectives were:

- Regional needs assessment (via a survey) and focus groups with women aged 55+ and over with lived experience of sexual violence to inform the development of training for rape crisis centres and organisations working with older women (outcome 1)
- 2. An awareness campaign and information/support resources (leaflets, guides, webpages) for women aged 55+ (outcome 2)
- 3. A service delivery model for older women, co-designed with women aged 55+ with lived experience (using focus groups, survey and feedback)

West Wales Domestic Abuse Service Ltd (WWA)

The WWA project wanted to focus on developing knowledge and cross-sector working in relation to older women. They had found that, when older women were first referred to their service, they were not properly captured by risk assessment and management tools. Often there is co-dependency. Their own model had been designed around needs of younger people and were not very flexible which is often what older women need. E.g. may need to outreach to them.

The West Wales Domestic Abuse Services Ltd project had three primary objectives/outcomes:

- 1. Effectiveness of services (in own organisation) for older women experiencing domestic abuse.
- 2. Improved inter-agency knowledge of how to work with older women experiencing domestic abuse.
- 3. Improved understanding of domestic abuse and its effects.

The key activities underpinning these objectives were:

- 1. Case work with at least 20 older women over 55 years of age to get deeper understanding of needs in terms of service/support (outcome 1 and 3)
- 2. Develop volunteer scheme with effective signposting to relevant agencies (older people's agencies and other sectors (outcome 2)
- 3. Training and awareness raising with 25 staff working in other organisations and sectors (outcome 2)
- 4. Peer support and befriending scheme (outcome 1)

Dewis Choice Project (Aberystwyth University)

This 12-month project aimed to examine the co-existence of dementia and domestic violence & abuse (DVA). A divide between DVA and social care practitioners was identified, particularly in relation to effective safety planning and gaps in knowledge around the needs and 'what works' by the project leaders which has driven the development of this project. This builds on the successful model of service delivery developed by the Choice Project which works with older victim-survivors of domestic violence and abuse.

The Dewis (Choice) Project had three outcomes/objectives:

- 1. Awareness raising among local community
- 2. Deliver frontline direct work with clients and families
- 3. To design and deliver expert training for frontline workers and volunteers.

The key activities underpinning these objectives were:

- Develop and deliver workshops by a dementia champion for up to 20 people (outcome 1 and 2)
- 2. Develop and deliver workshops to improve local knowledge about healthy and unhealthy relationships and coping for up to 20 people (outcome 1 and 3).
- 3. Engaging with up to 10 families (one-to-one) to provide support via training up volunteers (outcome 2)
- 4. 100 frontline workers and eight volunteers will take place both at community and national levels (outcome 3).

Birmingham and Solihull Women's Aid (BSWA)

The BSWA project aims to address domestic violence in women over 55. BWSA identified that domestic violence in this cohort is severely underreported and recognised across all agencies locally and nationally. Consequently, it is not identified or responded to properly and there is a general lack of awareness among professionals and the community about the needs of older women. This is particularly true of older women from minority communities, such as BME women and lesbian/bisexual women. This project aims to build knowledge and increase confidence for working with older women from diverse groups both within BSWA and local organisations.

The BSWA Project had three outcomes/objectives:

- 1. BWSA staff recognise and address diversity of needs in relation to age within the 55+ age category, particularly with reference to BME & lesbian/bi women, who have experience domestic violence and abuse.
- 2. BWSA support services respond to the needs of women aged 55 and over
- 3. Health, social care and domestic abuse professionals are better able to support women aged 55 and over who are experiencing abuse.

The key activities underpinning these objectives were:

- 1. Training for DV, health and social care practitioners including own staff (outcome 1)
- 2. Service delivery group work social group outreach to get older women's views and experiences this was also fed into training (above) (outcome 2)
- 3. Develop overview of existing services that might work with older people to build relationships and referral pathways (outcome 3)

Solace Women's Aid

Solace have been delivering direct services to older women experiencing domestic violence and abuse for several years (including the Silver Project) and have worked locally with different professionals and agencies to raise awareness and develop referral pathways. This project builds on that work and focuses on women aged over 55 who have particular vulnerabilities and/or complex cases to develop new methods of intensive, longitudinal support. The project incorporated some research on the referral pathways to MARAC.

The Solace Project had three outcomes/objectives:

- 1. Women aged 55+ who have been affected by domestic and/or sexual violence access specialist advocacy support and safety planning and are better able to improve coping strategies
- 2. Closing knowledge gaps by developing new insights into three groups of survivors (women whose perpetrator is an adult child, women who have involvement with the Criminal Justice System and refugee/ migrant women who have insecure immigration status or no recourse to public funds)
- 3. Adult Social Work practitioners and other professionals and general public gain increased awareness and understanding of domestic and sexual violence among older women.

The key activities underpinning these objectives were:

- 1. Case work with 20 women with particular vulnerabilities/complex cases (outcome 1 and 2)
- 2. Research with three groups of older women to close existing knowledge gaps (outcome 2)
- 3. Action research with adult social care to identify difficulties/constraints social workers face this involved focus groups with social workers (outcome 3)
- 4. Training of 90 social workers using findings from the research (above) (outcome 3)
- 5. Create a directory of resources in London where women, families and professionals obtain support for women over 55 experiencing domestic/sexual abuse (outcome 3).

Rape Crisis Tyneside and Northumberland (RCTN)

The project intended to increase awareness of sexual violence against older women with frontline practitioners across health, criminal justice, social care, adult safeguarding, domestic & sexual violence agencies and other third sector organisations. It builds on previous scoping and awareness raising work undertaken by RCTN, which has included developing information guides for professionals.

The objectives/outcomes of the RCTN project were:

- 1. Professionals have increase awareness regarding the issue of sexual violence against older women
- 2. Professionals report increased levels of confidence in supporting older women who have suffered sexual violence

3. Public levels of awareness regarding the issue of sexual violence against older women will increase.

The key activities underpinning these objectives were:

- 1. Training courses for professionals across different sectors in the region (approx. 100 people) (outcome 1 and 2)
- 2. Awareness raising campaign (posters, banners and social media messaging) (outcome 3)
- 3. A video featuring the stories of older women (outcome 3) that will be used to develop future training courses.

Staffordshire Women's Aid (Staff WA)

Staff WA had identified the invisibility of older women in the Violence Against Women and Girls local agenda and in their own service. In particular, a lack of local knowledge about the needs and experiences of older survivors underpinned the project. The project set out to create changes in attitudes towards VAOW at a local level, and to work with older women to have a stronger voice on VAOW locally.

The Staffs WA Project had three outcomes/objectives:

- 1. Agencies and community groups who have regular contact with older women are better equipped to respond to their needs relating to violence and abuse
- 2. There is increased knowledge in the local community on violence against older women and the needs of older women
- 3. Older women have a stronger voice on violence against older women in the local community and are able to articulate their needs.

The key activities underpinning these objectives were:

- 1. Training and awareness raising with 34 local agencies and organisations (outcome 1)
- 2. Train 16 older women to become community ambassadors (outcome 2)
- Establish an Older Women's Voices Group a peer group for older women to share experiences and support each other – which will attend/feed in to local multi-agency meetings (outcome 3)

Project learning and outcomes

Although each of the individual projects had specific objectives, there were a number of common themes across the cohort.

Training and awareness raising

All of the projects incorporated some awareness raising and/or training, either within their own organisation or with external agencies and communities. In most cases, the individual projects aimed to build local capacity by equipping professionals with basic knowledge and understanding of domestic and/or sexual violence among older women to increase professional confidence in identifying and responding, including referring older women into the grantee's service. This included increasing awareness among key sectors to drive referrals to the grantee's organisations. Several of the grantee organisations saw increases in the numbers of older women referred into their service during the project:

- BSWA saw a rise in older women service users from 0.02% to 5% AND an increase in older volunteers working in the service (from 18 to 32)
- Welsh WA saw a 20% increase in older women being referred into their service
- Staff WA also saw a 20% increase in older women being referred into their service.

Most of the projects found statutory and non-statutory services were very receptive to training and identified this as a strength and success of their projects. For example, BSWA reported:

We have found organisations working with women over 55 are very open to our training and we are also finding out about resources for women as a result of building relationships with these organisations.

Solace WA similarly had significant success in delivering training, particularly with adult social workers:

We are proud to have delivered specialist training to 101 Adult Social Workers, thereby improving older women's experiences of the service. Additionally, we delivered presentations to 34 other professionals around working with older survivors, and from a recommendation from one of these we were asked to present at an NHS conference where we did so to 170 professionals.

However, designing and delivering training also presented some challenges for all of the projects. The main issues were:

 Getting commitment from organisation/agencies to attend the training – although interest in the training/workshops was usually high, this did not always translate to bookings, even though the training was free. Resource issues, particularly underfunding and limited capacity for training of staff, made it difficult to organise training with some organisations. However, most organisations managed to address this by adapting the training. For example, Solace took the following approach:

Due to the underfunding of social care, social work departments have limited capacity for arranging training and staff have limited capacity to attend. It took a larger portion of the project's time to establish dates and encourage attendance. We were still concerned that we wouldn't be able to meet our target of training 90 Adult Social Workers, and in August had revised the target with yourselves to training 50-60 Social Workers throughout the year. However, we are pleased to report that we did arrange trainings for all 5 boroughs, and provided full-day training to 101 Adult Social Workers. Through adapting the original plan to replace three-day courses with more one-day trainings we managed to exceed our training target.

Similarly, BWA adapted the length and focus of their training to increase engagement with statutory and non-statutory organisations:

We have found that due to the constraints on releasing staff from their day to day work, we have had to be flexible and offer different formats e.g. full day, half day, training over two half days and adjust content accordingly. Occasionally we have had to do a short presentation rather than training but at least it raises awareness of the project. We found that when we can deliver a good training day, the manager of the group being trained often recommends it to their colleagues which really helps us access teams. The key seems to be offering flexibility when you first discuss training as this is often when they appear reluctant due to worry about releasing staff. Also delivering short awareness sessions or presentations does sometimes lead to a proper training session, so worthwhile.

Some resistance from social/care sectors, mainly as a result of resource constraints and some reluctance to discuss issues of violence/abuse within care settings. For some of the projects (3/7) this resulted in a change of project objectives or meant they could not meet the original objectives. For example, SARSAS reflected:

We were hoping to work more closely alongside care homes so we could include responses from women living in care settings in our survey data. Although we had 2 representatives from care home organisations on our advisory group, there was still resistance to share our survey within their homes due to fears around not being able to respond effectively to disclosures of sexual violence (recent and historic) and any possible trauma that may surface as a result of women completing the survey. There was also a reluctance to display information about sexual violence within their care homes in case it implied that their organisation had a particular issue when other homes didn't. This meant that the voices of women from this part of the community were not included in the outcomes of the project. They were also not reached through the awareness raising part of the project as homes did not want to display the posters. We are really keen to try and engage with the CQC to try and implement guidelines that have to be followed by all care homes as a possible way of addressing this. This is not currently possible due to lack of resource/capacity at our end and the ongoing crisis facing care homes in response to Covid-19.

 Difficulties engaging with minority community groups – again, due to resource and funding pressures, lack of existing relationships with these organisations and some cultural barriers. This had similar implications for some of the projects in terms of not meeting original objectives. For example, SARSAS reported:

We were hoping to gather survey responses from a diverse range of communities in our survey and to raise awareness around SVAOW and support services. Although we gained some traction with a couple of regional disability and LGBT+ organisations, we were unable to successfully engage with BAMER groups to help promote the survey and awareness campaign. There is a bit of resistance to discussing sexual violence openly within some (although not all) of these groups which resulted in us being unable to hear from women represented by them. Many equalities groups are grossly underfunded and simply do not have the time or resource to work on projects outside of their immediate remit. As a result, our survey and focus group results were not truly representative. Other projects did have some engagement with local minority community groups but did not have time to develop these as fully as they would have liked. For example, RCTN reported:

The Angelou Centre (Black Women's Refuge) in Newcastle attended our training and film launch but we didn't link up with them for anything else. We have an existing relationship with them. If our worker had had more time, it would have been good to link with them more.

Develop knowledge on older women incl. older minority women

All of the projects included objectives to develop knowledge and understanding of violence against older women, either locally or more generally, and use this to inform local practice, increase awareness and in many cases deliver training. All of the services enhanced their knowledge and understandings of different forms of violence against older women and their needs, but identified a number of challenges:

 The lack of available data on the prevalence/nature of violence against older women both locally and nationally – this has impacts on awareness raising, funding applications and engaging local services. Being able to discuss the extent of a problem and use evidence to develop training/resources is critical. Similarly, a gap in evidence on the needs of older women can make it difficult to develop services. Thus, incorporating an evidence gathering/research element to projects is essential, as otherwise most of the development of services is based on guess work or assumptions. This is particularly the case on specific age-related challenges that co-exist with violence and abuse. For example, in relation to dementia, Dewis Choice reflected:

It was felt that more needed to be learnt about dementia and the co-existence of domestic abuse before quality of life measures could be designed. As an exploratory piece we examined our practitioners' reflexive practice and held one-to-one conversations and group discussion with our practitioners to glean their subjective perspectives on their clients' quality of life throughout engagement with the service.

• All of the projects that conducted research experienced difficulties in recruiting older women to take part in surveys/focus groups/interviews. For example, RCTN noted:

[One challenge was a] lack of survivors/victims willing to speak or join focus groups.

However, other services found engagement in peer groups was very good. For example, Staffordshire WA reflected:

The Older Women's Voices group was successful, and this was particularly highlighted by the 'Celebrating Herstory' event. There was a turnout of over 60, mostly older women. It was a real celebration of older women's achievements, with a talk about the suffragettes from a local historian, a talk from a survivor, and one from a woman who has started a local charity combatting Period Poverty. Its success was mostly its positive approach to what older women have to offer, and how central they are to the project.

Several projects (Solace Women's Aid, Staffordshire Women's Aid, SARSAS and Birmingham and Solihull Women's Aid) incorporated a specific focus on engaging with women from minority communities (i.e. BAME, LGBT, travellers and so on) and others aimed to build relationships with local

groups to enhance knowledge on the specific needs of women from diverse backgrounds. This is to be welcomed, as there is currently a dearth of research, policy and practice in relation to violence and abuse against minority women. However, several projects experienced challenges in engaging with local community groups and organisations due to limited resources/under-funding of these community organisations and cultural norms and values rendering violence and abuse of older women even more invisible. For example, SARSAS reported that:

Engaging with minority communities proved difficult. Again, limited capacity to develop methods and relationships within, e.g. BAMER communities meant it was hard to ensure messages reached these groups of women. Equalities groups are extremely under-funded and are often unable to engage with issues outside their remit.

Improve multi and inter-agency working

All of the projects included elements of multi-agency working, either through training and awareness raising or direct service development and delivery (for example, establishing new relationships with different sectors working with older women, enhancing referral pathways, conducting joint research etc.). The Comic Relief funding provided opportunities for the grantee organisations to work on developing relationships with these key sectors and agencies, most notably health, adult safeguarding, age-related charities and social care. Most of the projects found local agencies to be very responsive and enthusiastic about working together, however some resistance or challenges were encountered, particularly in relation to care homes and providers. For example, SARSAS reported that:

Engaging with the Care Home sector was also difficult (although 2 major care home providers did sit on the SARSAS advisory group). There is a reluctance to address the issue of SV within institutional settings for fear of not knowing how to respond, embarrassment or misconceptions about it not effecting older people.

The majority of care homes are now privately owned and run (Campbell, 2019). Although the service is a public one, and funded through local authority budgets, the provision of services has been privatised. Consequently, it is more difficult to collect and analyse data held by these organisations and may be more challenging to engage care homes in addressing issues of violence and abuse.

Several organisations benefitted from strong relationships with statutory services. The Dewis Project found strong partnerships with key referral agencies (namely social work and health) were key to the success of their project. Having buy-in from these organisations from the start of a project is critical. Additionally, a multi-agency aspect was embedded in the project by including a health professional as a consultant who was trained up on the issue of violence against older women and then helped to build community referrals:

A health professional was given a consultancy role within the project. The consultant was trained by the project on domestic abuse and the co-existence of dementia, and was equipped with the skills to identify and respond to abuse in this context. The health consultancy role helped to facilitate referrals from community-based settings, the professional was known person within the organisation and which helped to establish trust in us as a service, which was particularly helpful due to the delicate nature of relationships and abuse within this context.

This highlights the importance of ensuring projects are inherently multi-agency rather than just incorporating multi-agency add-ons.

Several organisations benefitted from multi-agency partnerships with age-based organisations, e.g. Age UK. West Wales found they could train volunteers already delivering services, for example Age UK offered home-visits through a befriending scheme as well as well-being projects, for example nail cutting. These offer opportunities for trained volunteers to identify older people who may be at risk of, or experiencing, violence and abuse.

Working with agencies and organisations must extend beyond traditional sectors (e.g. social work, housing) to develop partnerships and raise awareness. For example, faith groups, Women's Institute and age-related organisations all work with older people and should be included when developing services and partnerships.

Develop services for older women - what works?

Several of the projects included the development of new services for older women and/or amending existing support provisions to ensure these were suitable for older survivors. Although the uptake for these services was relatively slow and small for most projects, there were notable successes for peerled and community-based initiatives, including the Ask Me Ambassador programme (Staffordshire WA) and Older Women's Voices project. Both of these increased local awareness, increased referrals and influenced the development of services. Several challenges were observed:

- It is critical that older women are involved in shaping services but recruiting older women to steering groups can be difficult – several projects had steering groups and/or focus groups of older people to help design services or provide feedback, but attracting and maintaining older women on these groups can be difficult.
- Meeting with older women can be challenging older women may be more likely to be isolated, either with the abuser or in care settings. Older age often means retirement, and the lack of a normal work routine can mean women do not have the opportunity to leave the house on a frequent basis. This creates challenges for women making contact and meeting with services. This is exacerbated by physical and/or mental health issues that some older women have, and in many cases the abuser is the care provider. Bespoke services for older women are critical. BWSA identified this as a key area of learning:

Older women will often comment that they feel they may be wasting our time. They feel that the service is for younger women, they say that they do not want to leave so they are wasting our time and they comment that they have stayed for such a long time that they shouldn't be getting help.

There is a great benefit from being able to say that we have a project specifically for over 55's. It reassures them that they are not wasting our time and that our support is absolutely for them.

- Generational attitudes affect support needs deeply ingrained beliefs about gender roles and women's rights present hurdles for engaging older women and in supporting them following disclosure. Older women may be less likely to leave abusive relationships due to these beliefs and attitudes, meaning they need support whilst remaining in the relationship.
- Timescales for support the longevity of abuse experienced by older women may mean they need long term support, which may require the development of new or amended services. BSWA reflected that:

As older women have often been in abusive relationships for years, if not decades, they may need longer term support than is offered by many of the traditional programmes and projects.

Solace WA reported:

We also found that many women in this situation require longer-term support; first to build a trusting relationship, then to identify and explore the dynamics of the abuse, and only after a period of time may a woman wish to take any action. Due to underfunding of the VAWG sector most generic services can only provide short-term crisis support which is inappropriate for this client group.

Domestic abuse/violence against older people will often be complex due to age-related health conditions, generational norms/attitudes and lifestyle factors. This will mean services and support will often need to be longer and more intensive. When working with older people who have dementia, the Dewis Project found:

Working with clients where dementia and domestic abuse co-exist was more labour intensive. Practitioners described how in cases where the dementia was advanced, they had to reintroduce themselves and their service often at the beginning of each visit. In these cases, visits often repeated content covered in previous visits, although the content would then be built on during each visit this process of gaining information to provide help and support was more time consuming.

 Engaging women from minority backgrounds is challenging – there are particular learning and service gaps for older women from minority groups including BAME, LBGT, traveller communities. None of the projects managed to successfully engage with minority communities and all reported under-representation of service users and/or agencies working with these communities. This partly reflected a lack of established relationships with these communities but also the intersection of age, gender and minority identities. For example, Dewis Choice reflected:

We had an under-representation of service users from BAME and LGBTQ+ older clients. We feel this is attributed to the invisibility of these marginalised groups within services and the lack of awareness of their specific needs. Although we promoted we were LGBTQ+ friendly on our website and in our publicity materials, for older people their sexuality is assumed as heterosexual or cis gender, thus identifying domestic abuse is particularly challenging and it is unlikely that they will be visible on monitoring systems. The lack of representation made us reflect on how we can better target these marginalised groups and raise awareness across organisations and measures have been put in place to improve this for stage two of the funding.

For the Dewis Project, engaging communities where the first language is Welsh was also a challenge, in addition to engaging with LGBT and minority women. Involving organisations from BAME/LGBT and other communities is key. Time and budget constraints have prevented the development of relationships which has hindered this. A dedicated engagement officer may provide opportunities to build these relationships but given the lack of funding, collaborative funding for multi-agency projects in the future is key.

 Ageism can create opportunities for perpetrators to undermine disclosures by older women. Several organisations reported that the perpetrator would claim the survivor had dementia or a lack of capacity as a tool of abuse, which they would weaponize as a way of manipulating and controlling older women. Solace reported similar issues with social workers and other key agencies sometimes assuming dementia must be an issue and subsequently pathologizing the survivor. • Adult sons/daughters (but most frequently sons) are an invisible offender group and there is a lack of knowledge, understanding, policy and service provision for responding to violence in this context. Solace WA identified abuse by (adult) sons/daughters as a key area of concern:

We supported 14 women experiencing domestic abuse from an adult child/grandchild. We have discovered through this project that there is a real need for specialist support around adult child to parent abuse. Although the project is aimed at supporting three different groups of survivors, almost 80% of referrals were for women experiencing abuse from an adult child or grandchild (many also fit in to another of the three groups). Many frontline workers expressed they find these cases difficult to support or provide options for given the complex nature of the relationship.

Staffs WA similarly identified son-to-mother violence as an issue and found there was little awareness and confidence among practitioners about identifying and responding to risk where the perpetrator is a son rather than intimate partner.

 Older women may require similar services delivered differently – traditional models of support may not be appropriate for some older women, for example many services may need to be outreach. For survivors with dementia, different ways of working may be required. The Dewis Project explored using engagement tools from different sectors for example talking maps, in lieu or alongside more traditional methods of working with survivors of domestic violence.

Learning from each other

As many of the projects overlapped in terms of their intended aims and objectives, there were opportunities for shared learning throughout. Some examples of shared learning included:

1. Sharing training materials – SARSAS and RCTN shared training slides and packs which cut down on time and resources developing separate training courses. However, some of the projects felt this could have been expanded if they had more time. For example, SARSAS said:

Unfortunately, there was not really enough time within the confines of the project hours to fully embrace the possibilities of co-designing and information sharing across all of the organisations involved, although we have remained in contact with and shared some resources with RCTN. There were some really great projects that I would have loved the time to get across and build networks with but there just wasn't the time.

Having a learning coordinator to share relevant policy/practice/research as it emerged and link projects in with each other to share resources was also identified as helpful. For example, RCTN said:

It definitely supported our project having you as the learning advisor and would have struggled without this. Access to someone with expertise of older women, outcomes and evaluation. I appreciated all your inputs really, campaign etc. It's such a niche area, so very good to have the expertise to hand.

2. Sharing outputs – a Box (a cloud-based system) folder was set-up to allow projects to share reports, guides and other outputs which the projects could benefit from when designing their own tools. This was viewed as a useful resource by the projects, for example SARSAS commented:

We have been utilising the resources in the shared resources folder on Box. It has been good to see what other organisations have been producing.

However, some of the projects struggled accessing the Box folder at times. Training on this at the learning event would have been helpful.

3. Observing what works with other projects – Welsh WA approached the Dewis Project to ask if they could observe/shadow some of their working in order to learn how they engage with older victim/survivors and develop a set of standards and consistency. Given the time constraints, there were limited opportunities for services to carry out any extensive observations of each other's approaches. On reflection, it would have been useful to get all the projects together for a shared learning event at the halfway point of the projects (as well as at the beginning and end). RCTN said:

I think getting together at the beginning was a great experience. A few more meetings might have been useful for updates.

The projects also felt meeting with the other projects was useful and benefitted from connecting with other organisations doing work in this area (facilitated by the Learning Coordinator in some cases). For example, BWA said:

It was really useful to meet the other providers at the start of the project and hear about the different proposals – it really helped us think about our project and what we wanted to focus on. It has felt good to be part of a bigger themed piece of work, even if we at BSWA haven't directly connected as much as we perhaps should have done. This was particularly the case during the Days of Activism in November when Comic Relief focused on the different projects on social media- it gave such great messages about older women and their experiences. We have connected with a couple of projects outside the cohort eg CHADD (Never too Late project) and Eva Women's Aid (over 55's project). They were wonderful and shared a lot of learning and training info.

Overall, the projects were all positive about the benefits of being part of a larger cohort in terms of being able to share learning/resources and materials and access research and policy information from the learning coordinator. The sharing of ideas and project aims at the first learning event helped the organisations to refine their own project objectives – for example, two of the projects specifically incorporated a focus on minority community groups as a result of the first learning event. All of the projects felt they would have benefitted from further face-to-face workshops or learning events throughout the projects to develop this further.

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