



Keeping Adults Safe
in Shropshire
Network



Joint Adult Safeguarding Event 2019: Domestic Abuse and Older People

Wednesday 20 November 2019
Barnabas Centre, Shrewsbury

Domestic Abuse in older people

Lucy Giles, Knowledge Hub Advisor



Domestic violence and abuse: new definition



The cross-government definition of domestic violence and abuse is:

any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality.

The abuse can encompass, but is not limited to:

- psychological
- physical
- sexual
- financial
- emotional



Controlling behaviour

Controlling behaviour is a range of acts designed to make a person subordinate and/or dependent by isolating them from sources of support, exploiting their resources and capacities for personal gain, depriving them of the means needed for independence, resistance and escape and regulating their everyday behaviour.

Coercive behaviour

Coercive behaviour is an act or a pattern of acts of assault, threats, humiliation and intimidation or other abuse that is used to harm, punish, or frighten their victim.

This is not a legal definition.



What we do

- Use our data, research and frontline expertise to help local services improve and to influence policy-makers, locally and nationally
- Create a platform for victims, survivors and their families to be heard and to demand change
- Offer support, knowledge and tools to frontline workers and commissioners
- Provide accredited, quality assured training across the UK
- Test innovative projects and approaches that make more families and individuals safe and happy

2,000+
Idva's trained

292
Marac's supported

68,000
Cases in our
Insights database



Domestic abuse overview

- Around 2 million people suffer from domestic abuse in England and Wales - 1.3 million women (7.5% of the population) and 700,000 men (4.3% of the population).
- Two women a week die at the hands of their partner or ex-partner.
- 85% of victims made five attempts on average to get support from professionals in the year before they accessed effective help to stop the abuse.
- As part of the Crime Survey for England and Wales, the ONS has recently started collecting data on those over 60. Pilot findings are due to be released later this year.
- SafeLives estimates that approximately 120,000 individuals aged 65+ have experienced at least one form of abuse (psychological, physical, sexual or financial).

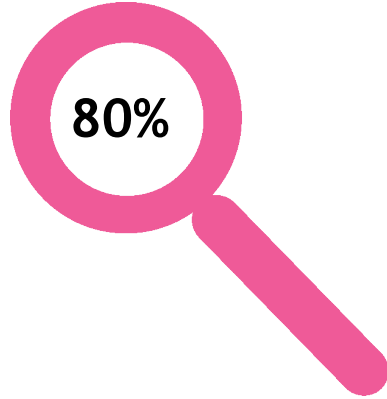


Key findings

- Just 4% of our IDVA national dataset are aged 61 or over
- While older clients are slightly less high risk than those under 60 and experience predominately moderate forms of abuse, they suffer abuse for much longer (**12.9 years compared to national dataset of 4.5 years**). This suggests that older clients are living with abuse for prolonged periods before getting the help they need.
- Even though older clients experience abuse for much longer, they receive support for a shorter period of time (**2.3 months compared with 2.8 months for the national dataset**)
- Further analysis of the length of abuse shows large variability, with 25% of cases having a length of abuse of 2 years or less, whilst 25% had a length of abuse between 20 years and 50 years.
- Only **0.7%** of cases heard at Marac are referred by Adult Social Care. Over 1/3 of Maracs had no cases referred from Adult Social Care in the past 12 months



What our data tells us



80% of older adults are **not visible to services**

Of those visible to services, $\frac{1}{4}$ live with abuse for **more than 20 years**



What our data tells us



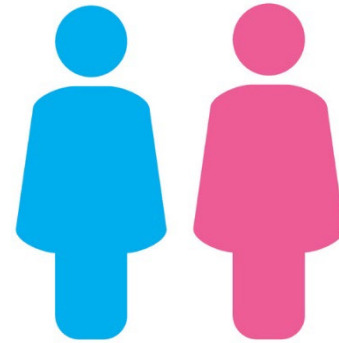
Older clients are **more likely to be referred through the police** (62% vs 60%)

Older clients are **less likely to self-refer** (10% vs 13%)



Gender profile of clients

While the majority of older clients are female, there are **much higher proportions of older men experiencing abuse** (20%) compared with those under 60 (4%)



- **Over 1/3 (35%)** of male victims had a female abuser
- **Over half (56%)** of male victims were abused by an adult family member



Perpetrator information

Perpetrators of abuse for clients aged 61+ are **mostly male**, but there are **higher proportions of female perpetrators**

Perpetrators of abuse against those aged 61+ were less likely to have a previous criminal record compared to those in the national dataset



Perpetrator gender	Male	Female
61+	83%	13%
60 & under	96%	4%

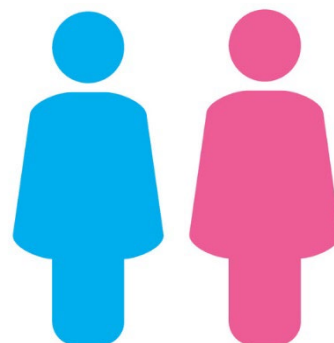


Female perpetrators



For the 61+ client group, 13% of perpetrators are Female, compared to 4% for victims aged 60 and under

Where the perpetrator is female, 54% of victims are male, and 46% female



Around half (52%) of female perpetrators are adult family members of the victim

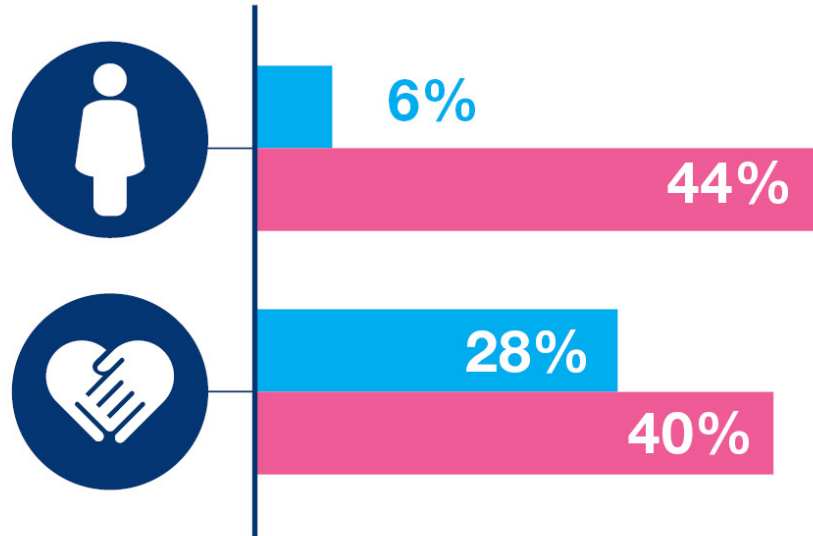


Circumstances at intake



Victims aged 61+ are much more likely to experience abuse from an **adult family member** or **current intimate partner** than those 60 and under

- Victims aged 60 and under
- Victims aged 61+

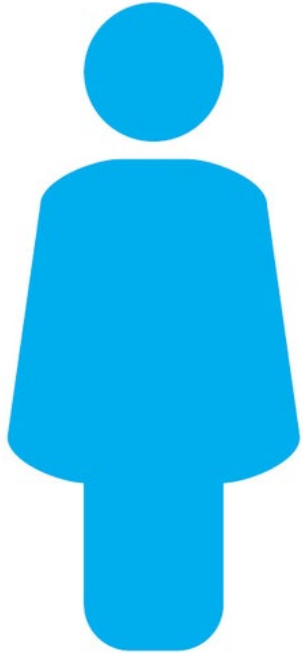


Circumstances at intake

	Living together	Not living together
61+	48%	45%
60 & under	20%	75%



Circumstances at intake



Older clients experience abuse for an average of **12.9 years** before accessing support. They are also much less likely to leave the perpetrator of their abuse

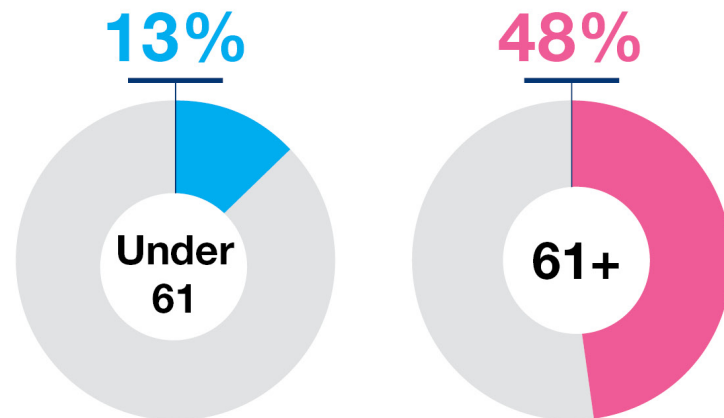
In past 12 months	Attempted to leave the perpetrator
61+	29%
60 & under	68%



Dependency issues



Older clients have a lower level of complex needs in terms of mental health and substance misuse, but are much more likely to have a disability / dependency issue



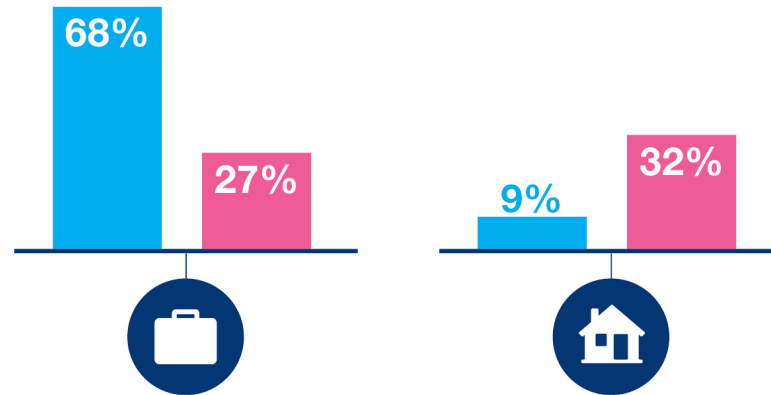
Older victims are significantly **more likely to have a disability** – for a third, this is physical (34%)



Circumstances at exit



Older victims are **less likely to attempt to leave** in the year before accessing help, and **more likely to be living with the perpetrator** after getting support



Abuse outcomes

% reduction in each abuse type	61+	60 & under
Physical abuse	68%	74%
Sexual abuse	56%	74%
Harassment & stalking	52%	58%
Jealous & controlling behaviour	54%	63%

Following support over 61+ clients

- Report large reductions across each type of abuse, but these are lower than those reported for under 60s
- Caseworkers are more likely to rate reductions in risk of abuse re-occurring as sustainable for the short term



Findings from an Insights service - over 60s



These observations come from a Leading Lights service using SafeLives Insights. For the last few years they have increased their focus on supporting older victims of abuse:

- One in three (34%) of victims were abused by an intimate partner, and the same percentage by an adult family member. This compared to 22% and 7% for all clients.
- Nearly half (43%) of clients were living with the perpetrator (vs. 23%)
- 16% were being abused by multiple perpetrators (vs. 9%)
- Only 1/3 of clients over 60 had attempted to leave the perpetrator, compared to 2/3 of all clients
- There were lower levels of complex needs (mental health, drug and alcohol use), but higher levels of additional needs, with over half (57%) of victims having a disability. This was just one in five for all victims seen by the service.

Findings from an Insights service - over 60s

- One in five (20%) of perpetrators were female
- Overall cases were open for a shorter time period and clients over 60 received a narrower range of support, more focussed on safety, and health & wellbeing, and much less on the criminal and civil justice system
- Only 1/3 (34%) had not experienced abuse in the month before case closure, compared to nearly half (45%) of all clients
- 5% of clients were supported in obtaining civil injunctions (non-molestation orders and occupation orders)
- There was criminal justice support in 1/3 of cases. Only a small number resulted in charges, primarily for assault, threats to kill, and breaches of restraining orders



Cry for Health annual data (2015-2016)

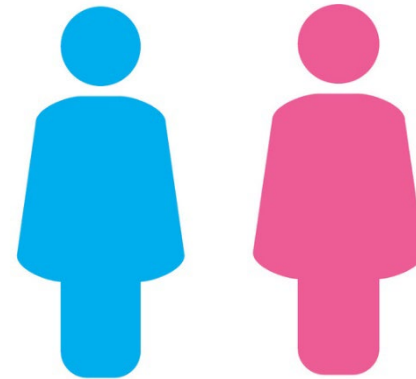
Comparing the Cry for Health hospital sites to the comparison sites in the same area

- Hospital services are significantly more likely to have older people as clients than local IDVA services (i.e. all other services, none of them health i.e. IRIS)
- 50+ clients account for 14% of hospital IDVA clients but only 10% of local IDVA clients. This difference is highly significant.
- 60+ clients account for 5% of hospital IDVA clients but only 3% of local IDVA clients. This difference is significant.
- 65+ clients account for 4% of hospital IDVA clients



Barriers

- Perception by older people that services are for younger people
- Generational/cultural/societal attitudes
- Family dynamics
- Health issues
- Financial
- Housing
- May not recognise their own experience as abuse
- Isolation
- Less likely to call 999
- Identification issues



Duties on Local Authorities

Social Services Wellbeing Act Wales 2014 and the Care Act England 2014 states that adult safeguarding “means protecting an adult’s right to live in safety, free from abuse and neglect”

(p.7) The safeguarding duties apply to an adult who:

- Has needs for care and support (whether or not the local authority is meeting any of those needs) and; Is experiencing, or at risk of, abuse or neglect; and; As a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect
- Local authorities must make enquiries, or cause others to do so, where reasonable suspicion exists that adult who meets the criteria at part 7 is, or is at risk of, abuse or harm.” (2014)



Policy and Practice recommendations

- Systematic Invisibility
- Long term abuse and dependency issues
- Generational attitudes about abuse may make it hard to identify
- Increased risk of adult family abuse
- Services are not effectively targeted at older victims, and do not always meet their needs
- Need for greater coordination between services



Key recommendation



Adult Social Care - Core agency at Marac



Policy and Practice recommendations

- Provide in-depth, face-to-face training for health professionals, social workers, care workers and any council staff who are regularly in contact with older people, accompanied by a Domestic Abuse Champion programme in Adult Services to ensure the learning is continued and new best practice can be communicated.
- Ensure that contracts for provision of domestic abuse support recognise that older victims may need prolonged interventions due to their abuse being sustained over a long period, and potentially a desire not to leave the family home.
- Provision of specialist domestic abuse services in a health setting - Idvas in hospitals/Mental Health Trusts, IRIS (Identification and Referral to Improve Safety) in primary care.



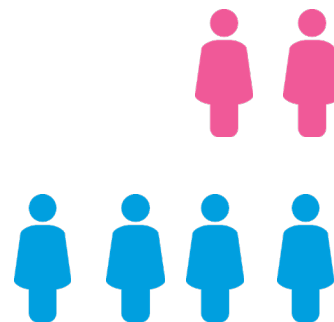
Policy and Practice recommendations

- Ensuring there is effective safety planning on the discharge of an older victim or perpetrator from hospital to ensure they aren't returned to an abusive situation
- Raise awareness of domestic abuse among older victims and ensure services are targeted to places older people will see - e.g. GP surgeries, public transport
- Training for domestic abuse professionals on inter-family violence and safeguarding issues around older people.
- Ensure older victims are consulted as part of service re-design such as housing and refuge options.
- Embed Adult Social Care as a core Marac agency to help increase crucial information sharing needed to keep victims safe.
- Adult Safeguarding Boards should monitor referrals of older victims to domestic abuse services and at Marac and action plan accordingly.



What our data tells us

Disabled women are twice as likely to experience domestic abuse than non-disabled women

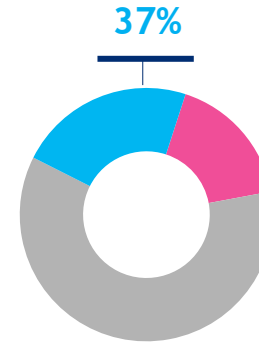


Disabled women experience more frequent and severe abuse over longer periods of time.

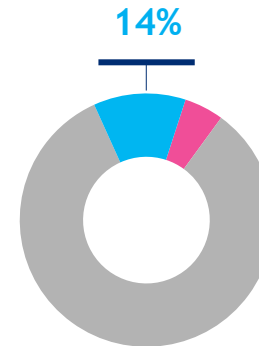


What our data tells us

Disabled victims are more likely to be suffering abuse from a **current partner (37%)** than non-disabled victims (**28%**).



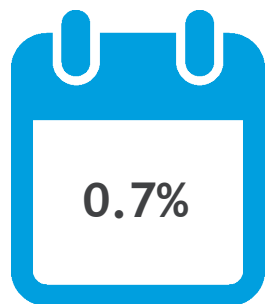
Disabled victims are more than twice as likely to be experiencing abuse from an **adult family member (14%)** than a non disabled client (**6%**).



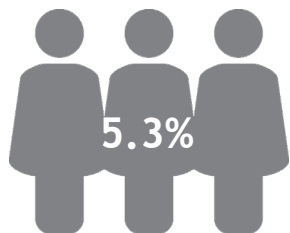
What our data tells us



Number of high risk victims of DV that are not being identified each year



Of all referrals to Marac, just 0.7% were from Adult Social Care



Only 5.3% of victims at Marac were recorded as disabled, well below the expected figure of 18%

What have the Spotlight experts highlighted further?



Survivor's Experience (DeafHope Survivors):

- The abuse experienced by disabled victims is **as severe and life threatening** as a non-disabled victim's experience despite society's perceptions.
- The perpetrator IS often disabled as well, and uses their knowledge of the disability **to control and isolate** the victim.
- Survivors with disabilities **do not have** equal access to support around domestic abuse that could allow them to leave the perpetrator safely.

What have the Spotlight experts highlighted further?



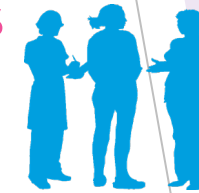
Specialist DV Services, Disability Experts and Academics:

(Public Health England, DeafHope, Talking Mats, Dr. Ravi K Thiara, Stay Safe East, Standing Together Against Domestic Abuse, Dr Michelle McCarthy)

- Perpetrator's use their positions as carers to **coerce and control** disabled victims and others.
- Disabled victims experience **the same forms of domestic violence**, but their **disabilities are also** used as a means of **coercion and control**.
- **Society ignores that disabled people experience domestic violence** and does not target DV education towards disabled people-especially regarding sexual violence and abuse.
- Learning disabilities go particularly **unidentified** as a vulnerability and domestic violence services do not know how to meet the needs of disabled victims, particularly those with learning disabilities.

What have the Spotlight experts highlighted further?

Specialist Disability Domestic Violence Maracs & Marac Scrutiny Panels (*Standing Together Against Domestic Violence, SafeLives*)



- Adult Social Care plays a key role in **identifying and responding** to a disabled victim
- Since the Care Act 2014, Adult Social Care has been added to the list of the 9 core Marac agency representatives.
- Still, not enough Marac agencies are **identifying** victim's disabilities early enough to address the risks at Marac.
- A multi agency approach (throughout the whole Marac process) is necessary to **understand risks** to a disabled person and to devise a safety plan-and Adult Social Care has vital expertise



What the Spotlight experts told us



Standing Together - Domestic Homicide Reviews (30)

- All agencies have a role in **identifying and responding** to domestic violence.
- Professionals made **assumptions** that older people don't experience domestic violence when displaying signs and symptoms of abuse.
- Over one quarter of those killed by a **current partner** were aged 58+
- Professionals **assumed** that younger current partners were their carers and not a domestic violence relationship.
- 6 domestic homicide cases revealed the perpetrator was their carer and **NO carers assessments were completed.**

What the Spotlight experts told us



Age UK

- Understanding: isolation, retirement, health, caring roles and shame
- Joining up approaches: the abuse of older people requires an Adult Safeguarding Response.

Solace Women's Aid-Silver Project- Over 55 Domestic Abuse Specialists

- Victims may not recognise their experience as abuse
- Reluctance to discuss abuse and think its too late
- Isolation and unsupported - both socially and physically

Findings from One Front Door so far

- Need for more awareness and earlier intervention
- Need for a more integrated, holistic approach
- Increased involvement and input needed from agencies such as housing, mental health, domestic abuse, especially at an early stage
- Shared responsibility of a case rather than deferring to another agency
- Case audits often revealed a focus on one person or one incident, rather than looking at the whole picture and the whole family



Why we need a new approach



Summary of agency involvement: Findings from a death review of two domestic violence perpetrators

5	Deaths – we found 3 connected deaths (2 suicides) in addition to the 2 who were subject to the review
14	Children placed on child protection plans
3	Children adopted
2	Looked after children
14	Children living with family members other than mum (either grandparents, aunt or father)
15	Referrals to Marac
25	Ambulance call outs (based on information from other agencies and Marac only)
30	Police incidents (based on information from other agencies and Marac only, so generally domestic abuse or child protection incidents)
2	Sections under the Mental Health Act
1	Hospital detox for 7 days
24	Children identified as being linked with the 4 main adults
26	Adults identified as being linked with the 4 main adults
188	Total number of known interactions/referrals with agencies

¹ Based on information gathered from those individuals who were in scope of the review

Socio Economic abuse

Economic abuse is a form of abuse when one intimate partner or family member has control over the victim's access to economic resources which diminishes the victim's capacity to support herself/himself and forces them to have an increased dependence on the perpetrator . It also includes financial abuse and is a risk factor that increases ten fold for older people in domestic abuse situations



Safe Lives is listening



Get in touch:

info@safelives.org.uk

Twitter @safelives_

[Facebook.com/safelives.uk](https://www.facebook.com/safelives.uk)

lucy.giles@safelives.org.uk