





ABUSE OF OLDER PEOPLE RESPONSE TOOLKIT



Elder Abuse Prevention Network North & West Metro



This toolkit is an initiative of the North and West Metro Elder Abuse Prevention Networks developed by Northern Integrated Family Violence Services, Western Integrated Family Violence Committee, and Holstep Health.

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We proudly acknowledge the Wurundjeri and Bunurong Peoples of the Kulin Nation, as the Traditional Custodians of the lands and waters across Naarm/ Melbourne's North and West Metropolitan regions on which we work.

We pay our respects to Elders past and present.

We recognise the enduring strength and resilience of First Nations Peoples and acknowledge the deep and lasting impacts of colonisation.

Always was, always will be Aboriginal land.

We all have the right to feel safe at home and in our community.

Unfortunately, many older people experience abuse, and the signs can sometimes be difficult to recognise.

Talking about abuse can feel uncomfortable, and finding the right support can be challenging.

This toolkit is designed to empower professionals to recognise and respond to the abuse of older people.

Helping to create a community where people of all ages are safe, valued, and respected.



What is abuse of older people?

Abuse of older people (also known as elder abuse) is any single or repeated act, within a relationship where there is an expectation of trust, that results in harm to an older person. This toolkit uses 'abuse of older people' rather than 'elder abuse' out of respect for the term 'Elder' by First Nations communities.

Abuse of older people can be carried out by a **partner, family member, friend, neighbour, carer, acquaintance or service provider**. Family members including adult children, their partners, and grandchildren account for the largest group of people perpetrating abuse of older people.

Abuse of older people is recognised as **family violence** under the Family Violence Protection Act (2008). The Royal Commission into Aged Care Quality and Safety (2020) also found abuse occurs in **aged care settings**.

There are many **barriers** that can prevent older people from accessing support or disclosing abuse, some of these include stigma, isolation, loss of personal agency, fear of consequences, digital exclusion, or not recognising that what they are experiencing is abuse.

Other key terminology:

Ageism refers to the stereotypes (how we think), prejudice (how we feel), and discrimination (how we act) towards others or oneself based on age. Ageism is understood to be a significant driver for abuse of older people.

Intersectionality describes how different aspects of a person's identity can expose them to overlapping forms of discrimination and marginalisation. Structural inequalities, including but not limited to gender inequality, racism, ableism, colonisation, homophobia, biphobia and transphobia can intersect with ageism, increasing the risk of abuse of older people for more marginalised groups and presenting additional barriers for accessing help.

Older people are typically defined as being aged 65 years and above, or 50 and above for First Nations people.

Person causing harm is the person who has been identified as using violence and abuse towards the older person. There are instances when harm is being caused unintentionally, nonetheless if the safety and wellbeing of the older person is affected, we have responsibility to act.

Forms of abuse

Form	Examples	What to look for
Psychological / Emotional abuse	Name-calling, humiliation, treating the person like a child, threats of placement in an aged care home, intimidation, bullying, or threats to "out" or reveal their gender, intersex, or sexuality status.	The person may talk about feeling helpless or useless and there may be changes in their behaviour.
Neglect	Failing to meet the person's needs including safe housing, personal care, adequate clothing, food, or healthcare.	Unexplained weight loss, poor hygiene, unsafe living conditions, or signs of distress.
Financial abuse	Misusing a Power of Attorney, stealing from bank accounts, or living in the older person's home without contributing to expenses.	Difficulty paying bills, lack of essentials (food, medication, health aids), cancelled support services, missing belongings, or unexplained bank withdrawals.
Physical abuse	Rough handling, physical restraint, locking the person in a room, or unnecessary use of sedatives.	Unexplained injuries, pain, fearfulness, flinching, cringing or signs of over-sedation.

Forms of abuse

Form	Examples	What to look for
Sexual abuse	Any non-consensual or threatened sexual contact including unwanted touching, exposure, or forcing the person to watch pornography or other sexualised content.	Injuries around the buttocks, thighs, or genitals, unexplained sexually transmitted diseases, urinary tract infections, psychological symptoms including anxiety, or sleep disturbances.
Social / Cultural abuse	Isolating the person from family or friends, restricting access to their community (including LGBTIQA+), or preventing access to religious or cultural practices.	Withdrawal, anxiety, low self-esteem, or feelings of loneliness and rejection.

Coercive control

A pattern of behaviour to establish and maintain control.

Coercive control is almost always an underlying dynamic of family and intimate partner violence.

It is a targeted behaviour to instil fear, impact self-esteem, autonomy, and independence. It may be physical or non-physical. The person causing harm may convince others it is a "normal" part of their relationship.



How to respond

The World Health Organization's **LIVES** framework, adapted for this toolkit, offers a helpful guide for responding to disclosures of abuse of older people.

Listen	Listen closely with empathy and without judgement	
Inquire	Inquire about their needs and concerns	
Validate	Validate by assuring they are not to blame	
Enhance	Enhance safety and discuss a safety plan	
Support	Support with referrals, information, and choices	

PLEASE NOTE

Preventing and responding to abuse of older people is an evolving area of practice. This toolkit may be updated as new evidence emerges. The toolkit provides general guidance and cannot address the nuances of every case. Specialist services can offer secondary consultation, and responses should consider each older person's unique circumstances.



LIVES Listen closely with empathy and without judgment

Take time to listen

Allowing time for the person to connect with you and voice their experiences is part of the process.

Allow plenty of time

Talking about abuse can be distressing for an older person, bringing up feelings of anxiety and stress. Allow enough time for these conversations, focusing on how they are feeling and any concerns they may have. Build rapport and trust, and explain your role and how you can support them.

Find a safe space to talk

Try and find a quiet and familiar environment where the older person feels safe and comfortable to talk. Check whether the person would like an interpreter, cultural advisor or other support person of their choice to be present.

Speak with the older person alone

Ensure you speak with the older person alone and not when the perpetrator is present. This may be challenging if the perpetrator is controlling and insists on being there. If needed, seek guidance from your supervisor to find a safe way to have these conversations.



L V E S Inquire about their needs and concerns

Opening Questions

The older person may not disclose abuse the first time you ask. Be patient and revisit these conversations over time, focusing on building trust and supporting their choices.

Some helpful questions to screen for abuse

- We generally ask about how things are going at home...
- Your safety is my priority, so I am required to ask you some questions...
- Older people can face many stresses, so we like to ask about any worries you might have?
- Does anyone stop you from being involved in activities or having money?
- Are there times when you feel unsafe? Or is there anyone in your life that you feel unsafe around?

Useful messages if there are **obvious signs** of abuse

- Conflict in families is very common so I always ask these questions...
- I am hearing some concerns about X's behaviour, can you tell me a little bit more about that?
- Do you feel safe where you are living?
- Has anyone close to you done something that made you feel afraid or unsafe?
- You mentioned X loses their temper. Can you tell me more about that?



LIVES Validate by assuring they are not to blame

Responding with empathy

Reassure the older person that they are heard, believed, and not to blame. Recognise their strength in speaking up and place responsibility on the person using violence. Everyone deserves dignity, respect, and safety.

Validating Feelings and Concerns

Listen to and acknowledge the older person's feelings - it takes courage to talk about experiences of abuse. Reassure them that they are heard and believed.

Common concerns about what will happen after talking about abuse include:

- Safety Fear of retaliation or further abuse.
- Isolation Worry about abandonment, institutionalisation, or losing contact with loved ones including grandchildren.
- Consequences for the person using violence Fear of legal action, job loss, or imprisonment.
- Care needs Concern about who will support them if they rely on the person using violence.
- Distrust of systems Past experiences of discrimination or barriers when seeking support can prevent help seeking including calling Police.

Reassuring the Older Person

Shame and self-blame are common, let the person know the abuse is not their fault. Redirect responsibility to the person using violence, reinforcing that violence is a choice they have made. Affirm their right to dignity, respect, and safety.

Explain how their information will be kept confidential and be clear about any limits to confidentiality, including situations where you have a duty of care, such as serious risk of harm.

Providing information and options

Some older people may not recognise they are being abused or know where to get help. Providing clear, accessible information empowers them to make informed choices.

LIVES Enhance safety and discuss a safety plan

Safety is central

Safety planning is an essential part of responding to abuse. Take the time to support the older person in thinking through practical steps to enhance their safety.

Prioritising Safety

- Signs of abuse must not be ignored, safety comes first.
- Act within your professional role, including confidentiality and duty of care.
- Respect the older person's choices; they are the expert in their own life.
- Provide information and options, do not make decisions for them.

Using a Safety Plan Template

- The template on the following pages guides professionals in safety planning with clients.
- It is not always safe to provide a written / printed copy of a safety plan, especially if the older person lives with the person using violence.
- Instead, store it securely in their file and review it regularly with the older person.

Keep Safety Planning Practical

- Keep plans simple and easy to remember.
- Discuss and review the safety plan regularly during appointments.
- Use professional judgment when recording safety measures and the reasons for them.

Substitute Decision Makers

- If a Substitute / Supported Decision Maker is in place due to capacity issues, they should be consulted.
- If the Substitute Decision Maker is the person using violence, seek advice from a specialist service.

Safety Plan

Date plan made/reviewed:

Call 000 in an emergency		
Contact method How will you contact emergency services or other supports. <i>Keep this charged.</i>	Mobile phone Landline Personal alarm Smart watch	
Trusted supports Identify friends or family who can be on alert to help you.		
Neighbours Do you trust neighbours to be part of your safety plan. How can they assist with warning signs, calling for help, escape routes.		
Code Develop a signal or code to indicate with trusted supports and /or neighbours that you need help and what they need to do.	Code word / phrase / action: People who know the code:	
Where to go Identify places you can go and how you will get there.		
Escape route Safest way out of the house or safest place in house until help arrives.		
Plan for pets Think about how pets can be removed to safety and cared for.		

Items to take in an emergency

Tick any items that are relevant to you. Consider packing an emergency bag ahead of time.



	O Mobile phone	O Clothes
Essential Items	🔘 Keys	0
	O Medications	0
Accessibility	O Glasses	O Walker/ walking stick
aids	O Hearing aids	0
	O Bank cards	O Driver licence
Wallot / purso	O Medicare card	O Pension card
Wallet / purse	O Money	O Taxi card
	Cheque book	0
	O Will	O Power of Attorney
Documents Consider leaving a	O Passport	O Immigration papers / visa
copy of these with a trusted person.	O Insurance papers	O House title / lease
	O Birth certificate	0

Important numbers

Police / Fire / Ambulance	000 (available 24/7)
Safe Steps	1800 015 188 (available 24/7)
Seniors Rights Victoria	1300 368 821 (Monday to Friday, 10am to 5pm)
GP/Doctor	
Personal alarm provider	
Home care service	
Home nursing service	
Other	

LIVES Support with referrals, information, and choices

Next steps

- Ensure you are acting in line with older person's wishes
- Ask about existing support services and share options for potential referral pathways.
- Ensure your documentation (e.g. case notes) includes details of who the person using violence is and their relationship with the older person; including if they are misusing an Enduring Power of Attorney.
- Include a copy of the safety plan in your documentation and review the safety plan each time you speak with the older person.
- Outline a plan for who is responsible for following up agreed referrals or actions and the expected timeline for these actions.
- O Ensure all actions are monitored, reviewed and information is updated if circumstances change.
- Follow your workplace policies and procedures. Speak with supervisor or manager as required.

Not sure what to do or need advice?

Secondary consultation is available to discuss referral options, risk assessment and other questions to support next steps. See pages 15-16 for more information.

Older person declines assistance?

The older person is the expert of their own life and has the right to make their own decisions and choices, including staying in an abusive situation. It is important to recognise that these decisions can be very complex. Let the older person know they can talk with you about it in the future if they like. Clearly document the discussion, including concerns, supports offered, and the decisions the older person has made.

Remember



Act within your professional role and responsibilities



Know your obligations for confidentiality and duty of care



Don't confront the perpetrator



Speak with the older person alone



Allow plenty of time for discussions



Have conversations in a safe, familiar environment



Discuss with immediate supervisor



Secondary consults with experts



Regularly check-in and have practical conversations about how to enhance safety



MARAM Framework



The Family Violence Multi-Agency Risk Assessment and

Management Framework (MARAM) has been developed by the Victorian Government to provide policy guidance to organisations that have particular responsibilities in assessing and managing family violence risk.

The aim of the MARAM Framework is to ensure all relevant services have a shared understanding and contribute to the identification, assessment and management of family violence risk. To achieve this, the Framework has been established in law and requires organisations that are prescribed services to align their policies, procedures, practice guidance and tools to the Framework.

For more information on the MARAM Framework visit: <u>www.vic.gov.au/family-violence-multi-agency-risk-assessment-and-management</u>



The Victorian Government has also created the **Family Violence Information Sharing Scheme**. The scheme outlines which organisations are required to share information in relation to family violence matters and how they are to do this.

To check if your organisation is an Information Sharing Entity and to find out your obligations visit: <u>www.vic.gov.au/information-sharing-entity-list</u>



National Services

Emergency	Police, Ambulance, or Fire	000
1800 ELDER HELP	National helpline for abuse of older people. Redirects to local service.	1800 353 374
1800 RESPECT	National sexual assault, family and domestic violence counselling line.	03 9216 0444

Victorian Statewide Services

<u>Seniors Rights</u> <u>Victoria</u>	Helpline, information and support including case management for abuse of older people.	1300 368 821 Mon-Fri 10am -5pm
<u>The Orange</u> <u>Door</u>	Family violence risk assessment, safety planning, and referrals. Visit website for local service.	Drop in or phone Mon-Fri 9am-5pm
<u>Safe Steps</u>	Entry point to refuge / emergency accommodation, crisis response.	1800 015 188 24/7
<u>Sexual</u> <u>Assault Crisis</u> <u>Line</u>	After hours crisis response for sexual violence.	1800 806 292 Mon - Fri 5pm - 9am Sat-Sun 24 hours
<u>Djirra</u>	Family violence service and legal support for Aboriginal women.	1800 105 303 Mon-Fri 9am-5pm
<u>InTouch</u>	Family violence service for migrant and refugee women.	1800 755 988 Mon-Fri 9am-5pm
<u>Rainbow Door</u>	Support and referrals for LGBTIQA+ people. Including family violence.	1800 729 367 Mon-Fri 10am–5pm
<u>Elder Rights</u> <u>Advocacy</u>	Support and advocacy related to aged care services, including abuse occurring in aged care.	1800 700 600 Mon-Fri 9am-5pm
<u>Carer</u> <u>Gateway</u>	Services and support for carers.	1800 422 737 Mon-Fri 8am-5pm
<u>Office of the</u> <u>Public</u> <u>Advocate</u>	Advice related to decision-making, capacity, and powers of attorney.	1300 309 337 Mon-Fri 9am - 5pm
<u>VCAT</u>	Decisions and dispute resolution including related to powers of attorney and medical treatment decision making.	1300 018 228 Mon-Fri 9am-4:30pm

North and West Metropolitan Victoria Services

<u>Better Place</u> <u>Australia</u>	Specialist response service for abuse of older people. Not currently available in Hume-Merri-bek or Brimbank Melton.	1800 214 117 Mon-Fri 9am -5pm
<u>VAHS Yarning</u> Safe 'N' Strong	Counselling service for Aboriginal and Torres Strait Islander Peoples for support with health and wellbeing.	1800 959 563 24/7
<u>Aboriginal</u> <u>Community</u> <u>Elders Service</u>	Supporting Aboriginal and Torres Strait Islander Elders to live safely and independently in their own home.	03 9383 4244 Mon-Fri 9am-5pm
NCASA	Crisis support and counselling for sexual assault in Northern Metro.	03 9496 2240 Mon-Fri 9am-5pm
<u>WestCASA</u>	Crisis support and counselling for sexual assault in Western Metro.	03 9216 0444 Mon-Fri 9:30-4:30

Professional Resources

<u>Ask Izzy</u>

<u>Australian Elder Abuse</u> <u>Screening Instrument (AuSI)</u>

<u>Compass</u>

A directory website for navigating local support services for people in need.

Screening tool for health, aged care and legal services.

A national website navigating abuse of older people in Australia created by abuse of older people Action Australia (EAAA).

Seniors Rights Victoria

Seniors Rights Victoria (SRV) is a specialist Community Legal Centre that advances the rights of older people and works to prevent abuse of older people.



Holstep Health

Email elderabusepreventionnetwork@holstephealth.org.au **Website** <u>www.holstephealth.org.au/eapn</u> **Phone** 1300 637 744

The Northern Integrated Family Violence Services

Email info@whin.org.au **Website** <u>www.nifvs.org.au</u> **Phone** 03 9484 1666 **Visit** Lvl 2 - 266 Raglan Street, Preston VIC 3072, Australia



Western Integrated Family Violence Committee

Email wifvc@wifvc.org.au Website <u>www.wifvc.org.au</u> Phone 03 9689 9588 Visit 317–319 Barkly Street, Footscray VIC 3011, Australia

