

DOMESTIC ABUSE IN LATER LIFE: PRACTITIONER TOOLKITS



THE CENTRE FOR AGE, GENDER AND SOCIAL JUSTICE.

DEPUTY DIRECTOR REBECCA ZERK

DAVID COWSILL, CHOICE WELLBEING PRACTITIONER



DEWIS CHOICE (2015 - PRESENT)

1. DELIVERS A CO-PRODUCED SERVICE FOR VICTIM-SURVIVORS AGED 60 YEARS AND OVER AND THEIR FAMILY MEMBERS.

2. CARRIES OUT THE FIRST GLOBAL STUDY TO CONDUCT LONGITUDINAL RESEARCH INTO OLDER VICTIMS 'LIVED EXPERIENCES' OF JUSTICE-SEEKING AND HELP-SEEKING.

3. IMPROVES PROFESSIONAL PRACTICE BY DELIVERING RESEARCH-LED TRAINING TO NEARLY 20,000 BENEFICIARIES.

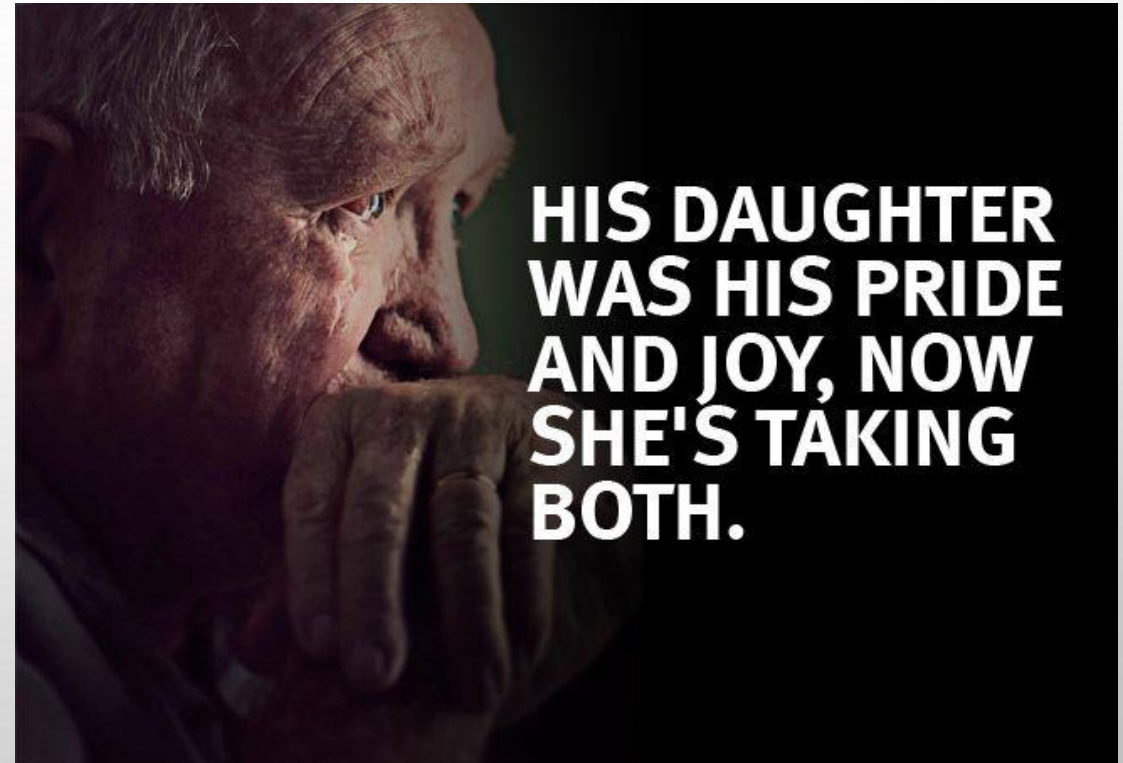
4. PROVIDE EXPERT ADVICE TO SHAPE AND INFORM POLICY AND PUBLIC DEBATE.



FALLING OUTSIDE THE 'PUBLIC STORY OF DOMESTIC ABUSE?'

THE SYSTEMIC AGEISM OF DOMESTIC ABUSE

- SIGNIFICANT GAPS IN RESEARCH
- SIGNIFICANT GAPS IN DATA COLLECTION
- GAPS IN SERVICE PROVISION
- A LACK OF VISIBILITY/RECOGNITION
- A LACK OF UNDERSTANDING ABOUT OLDER VICTIM-SURVIVOR 'LIVED EXPERIENCES' OF DOMESTIC ABUSE





**FREE PRACTITIONER
GUIDANCE AVAILABLE
TO DOWNLOAD FROM
OUR WEBSITE:**

DEWISCHOICE.ORG.UK



Domestic abuse and the co-existence of dementia

By Sarah Wydall, Elize Freeman
and Rebecca Zerk



The toolkit offers practical advice to support practitioners responding to domestic abuse and the co-existence of dementia to:

- Understand what dementia is and how it affects people
- Understand the different dynamics of domestic abuse and harm where dementia is a feature
- Understand the importance of social connections for older victim-survivors
- Gain practical techniques to support engagement and effective safety planning
- Understand the legal rights and protections for people with dementia

Prevalence of dementia and how it affects a person

Dementia is the term used to describe a group of symptoms affecting cognitive function caused by diseases of the brain, the most common of which is Alzheimer's disease.

- There are approximately 850,000 people in the UK living with dementia (Alzheimer's Society, 2019).
- Women are disproportionately affected by dementia.
- Dementia is progressive but the rate of progression will vary for each individual.
- Dementia increases the risk of being vulnerable to economic, physical, sexual, and psychological abuse.



Domestic abuse and the co-existence of dementia

Relationship dynamics:

- Victim-survivor has dementia and there is a past history of abuse
- Alleged perpetrator has dementia and there is a past history of abuse
- The relationship has always been healthy with no history of abuse and the harmful behaviour is a direct consequence of the dementia
- Victim-survivor has dementia and is experiencing abuse from an adult family member
- Both victim-survivor and perpetrator have dementia



Care or Control?



Key skills for engagement

Gain detailed information about the victim-survivor before meeting:

- Where does the person feel safe to disclose?
- Who does the person trust/feel safe with?
- Has the person's mental capacity been assessed?
- Does the person have any communication difficulties?
- What are safe subjects for discussion?



Case study

Rosemary* is a female client aged 86 years, living with dementia. Rosemary has experienced domestic abuse from her husband throughout their marriage of 62 years. Rosemary was referred to the project by a social worker, who said she attempted to refer Rosemary for specialist domestic abuse support, but the domestic abuse organisation stated they lacked the skills and necessary training to respond to the dementia.

Prior to the onset of dementia, Rosemary states she was able to manage her safety as she was able to identify her husband's abusive triggers, remove herself from the same room and hide in the bedroom. As Rosemary's dementia progressed, she says she is no longer able to recognise the signs of potential escalation in the perpetrator's behaviour and is unable to remember that direct confrontation results in more serious injury. On occasions, Rosemary's instant reaction was to leave the family home; however, this was not always carried out safely i.e., climbing through the bathroom window. Despite the increasing risks, Rosemary expressed a wish to remain living in her home with her husband.

The Dewis Choice team worked with the social worker, Rosemary and safe family members to identify the range of trigger points for the perpetrator. It was identified that that Rosemary's husband would get particularly angry when Rosemary burnt his food (due to forgetting it was in the oven) or if Rosemary forgot to take her medication. Attempting to disrupt the perpetrators behaviour, carers were put in place daily to provide meals and administer medication.

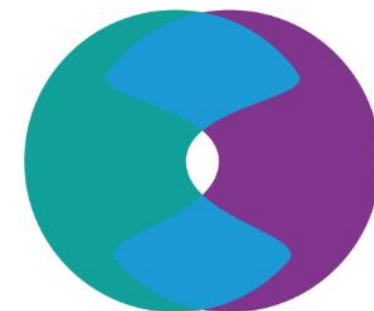
Rosemary's husband had acted hostile towards family members and carers to discourage them from having contact with Rosemary. The Dewis Choice team worked with the social worker to identify safe people within Rosemary's informal social networks. Family members were informed about the abuse Rosemary was experiencing and how the perpetrator's hostile behaviour was an abusive tactic to isolate Rosemary. As an informal protective factor, family members devised a plan to have regular contact with Rosemary and set up a 'WhatsApp' group to share information on Rosemary's well-being and safety. Neighbours and a local hairdresser were invited to the group. This group monitored the situation and shared information with the social worker and the Dewis Choice team. In addition, Rosemary's social connectedness was increased.

*not her real name



'More than one'

Rosemary case study



Dewis Choice

The Mental Capacity Act (MCA) (England and Wales) 2005

- **Principle 1:** Assume a person has capacity unless proved otherwise.
- **Principle 2:** Do not treat people as incapable of making a decision unless all practicable steps have been tried to help them.
- **Principle 3:** A person should not be treated as incapable of making a decision because their decision may seem unwise.
- **Principle 4:** Always do things or take decisions for people without capacity in their best interests.
- **Principle 5:** Before doing something to someone or making a decision on their behalf, consider whether the outcome could be achieved in a less restrictive way.

Legal guidance

Best interest
decision making

Lasting Power of
Attorney (LPA)

Deputies

Advanced
Decisions and
Advanced
Statements

The role of the
Office of the Public
Guardian

The Centre for Age Gender and Social Justice

A Good Practice Guide

WORKING WITH OLDER LGBTQ+ VICTIM-SURVIVORS OF DOMESTIC ABUSE

Written by:

Sarah Wydall, Rebecca Zerk and Elize Freeman



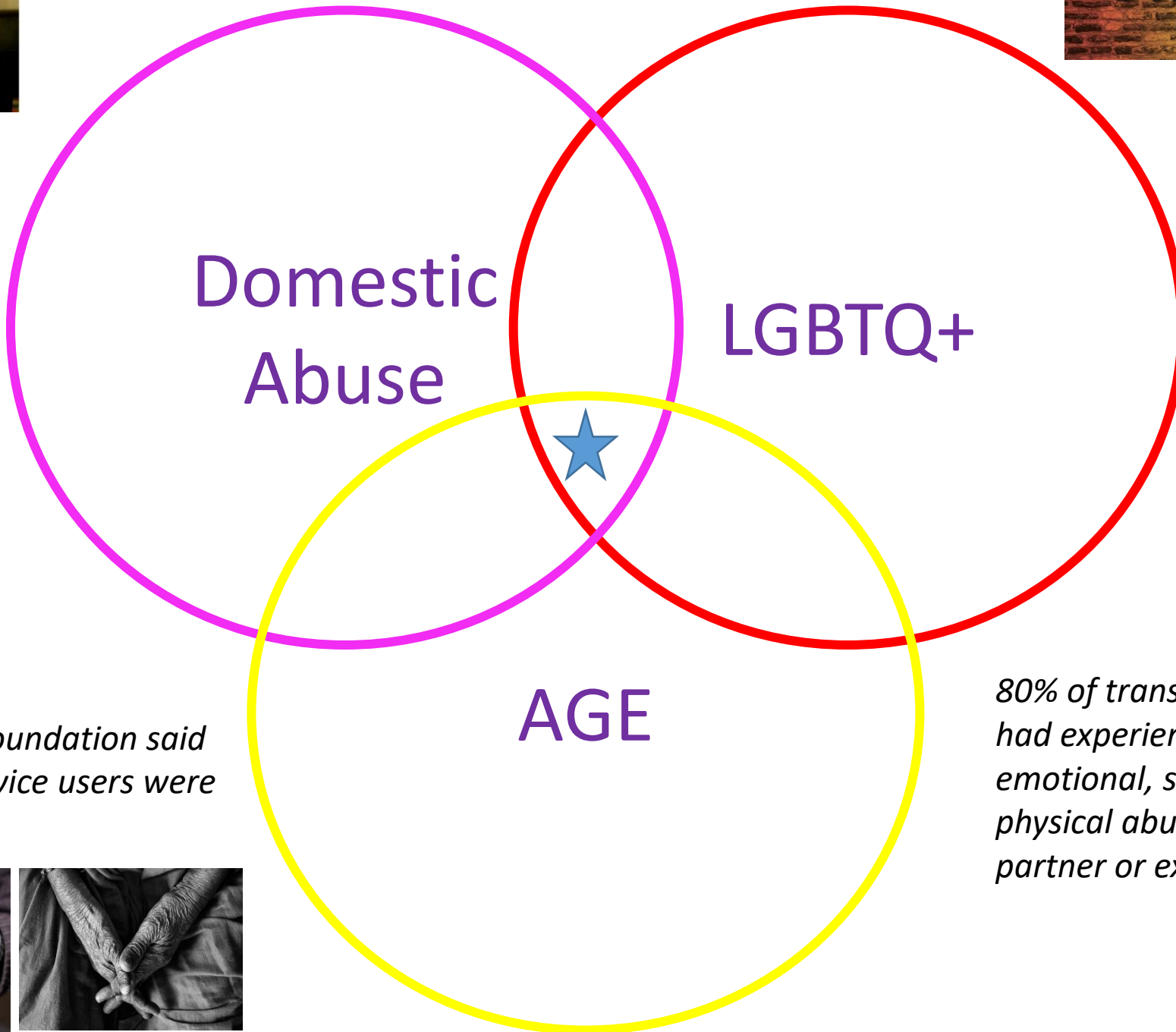


1 in 4 women
1 in 6 men experience
domestic abuse.

For the year 2019, LGBT Foundation said
that only 0.1% of their service users were
aged 60 years and over.



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1 in 4 LGBTQ+
people will
experience
domestic abuse.

80% of trans people
had experienced
emotional, sexual, or
physical abuse from a
partner or ex-partner.

Research

- Visual scoping exercise
- Two workshops with 28 practitioners
- Individual narrative interviews with 14 older LGBTQ+ people, including victim-survivors of domestic abuse
- Drawing on four specialist practitioners responses for the film



'Do You See Me?'



Good Practice Guide

- About Dewis Choice
- Terms of Reference
- Older LGBTQ+ People
- The Nature and Prevalence of Domestic Abuse in LGBTQ+ Relationships
- Barriers to Accessing Help, Support and Justice
- Enablers to Accessing Help, Support and Justice
 - Individual level
 - Organisational level

Enablers to accessing help, support and justice for older LGBTQ+ people

Individual practitioner responses

People need to talk about it. We need to acknowledge abuse, violence and we need to be ready to listen, understand and support ourselves as well as anything else.

Gay man, Dewis Choice

✓ Gender neutral terms

Gender and sexuality always matter regardless of age or background. Avoid making assumptions about people's lives and experiences. Avoid using gendered language, such as husband or wife, and pronouns, such as he or she, until you have established sexuality, gender and relationship status. Instead use neutral terms, such as, 'partner' and 'they'.

Bear in mind that referral information may be incorrect, or information may not have been gathered, so ensure you check and record data on sexuality and gender accurately.

✓ Use the correct pronouns

You should always ask what pronouns people want to use and what they use themselves. Not everyone feels comfortable with the traditional she / he pronouns and may wish to use other pronouns such as they or ze. Use of the pronoun that a person states best reflects their identity is considered respectful, and the use of other pronouns could be disrespectful and lead to disengagement.

✓ Be aware of deadnaming

Deadnaming is calling someone by a previous name assigned to them at birth when they have changed their name. This term is often associated with trans people who have transitioned and changed their name as part of this process to reflect their gender identity. The use of a deadname, either directly to the individual or when referring to them, is considered disrespectful and invalidating.

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✓ Identify harmful and positive social connections

Recognise that older LGBTQ+ people can experience domestic abuse from intimate partner(s), adult family members and/or families of choice. It is possible likely that an older LGBTQ+ person has experienced abuse from family members and intimate partners either co-ocurrently or sequentially. Knowledge of this will help to identify which social inhibit the victim-survivor in their help-seeking. Conversely, exploring positively social contacts can identify possible sources of ongoing support.

Remember that abuse can happen in any relationship, regardless of whether there is one partner, two partners or in some cases more. In polyamorous relationships it is likely that there can be multiple victim-survivors or multiple perpetrators, and this should be explored.



✓ Don't assume an older person who is LGBTQ+ is "out" in all areas of life

An older person may be 'out' in some areas of their life and not in others. For example, they may be 'out' to close friends but not to family, or in certain social settings. If you are unsure, ask, this could be vital to their safety. For example, if you are discussing them visiting their GP, check their GP knows, or if they feel comfortable to disclose their sexuality and relationships to the GP.

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Hidden Victims

Christian Gordine, independent film director

Elize Freeman, Dewis Choice

Peter Kelley, Galop

Rhys Dower, formerly LGBT Foundation. Now DA
Manager, Trafford Council.

Matty Herring, Opening Doors

Accessible via our YouTube Channel:

https://www.youtube.com/channel/UCm3YK_wYUbpXoORO87wIOEA



Podcast

<http://outofsightpodcast.co.uk/>

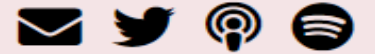
**OUT
OF
SIGHT**

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Episode 1: An Introduction to Domestic Abuse and Older Victim-Survivors

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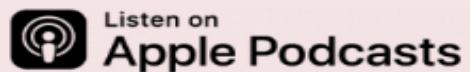
Episode 2: Understanding Intersectionality - Disabilities and Older Domestic Abuse

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Episode 3: Older Lesbian, Gay, Bi, Trans and Queer Experiences of Domestic Abuse

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Dewis Choice Resources

- [Research publications](#)
- Practitioner guidance (e-version)
- [Safety planning tool](#)
- [Adapted Power and control wheel](#)
- Training
- Film: [“Do you see me?”](#) – older LGBTQ+ victim-survivors of domestic abuse
- Film: [“Hidden Voices”](#) – practitioner responses to older LGBTQ+ victim-survivors
- Film: Dementia and Domestic Abuse: [the forgotten victims](#)
- [Toolkit](#) for practitioners responding to older LGBTQ+ victim-survivors
- [Out of Sight Podcast](#)

Accessible via Dewis Choice website @:
<https://dewischoice.org.uk/information-and-advice/resources/>



Wydall, S., Freeman, E. and Zerk, R. (2022) Domestic abuse and the co-existence of dementia [*online*] available at: https://dewischoice.org.uk/wp-content/uploads/2022/02/Dewis-Choice-Dementia-and-DA_COMPRESSED.pdf

Wydall (2021) Intimate Partner Violence - Transforming the response to older victim-survivors in later life in *The Routledge International Handbook of Domestic Violence and Abuse Edited Book*. Devaney, J., Bradbury Jones, C., Holt, S., Macy, R. J. & Øverlien, C. (eds.). 1 ed. Taylor & Francis, Vol. 1. 27 p. 14 (March 2021)

Do You See Me? is a short co-produced documentary exploring the lived experiences and first hand accounts of older LGBTQ+ people who are victim survivors of domestic abuse. Gordine, C., Wydall, S., Zerk, R., Chapman, T., Joiner, A., Craine, J., Mitchell, X. & Bulman, R., 17 Nov 2020, The Centre for Age, Gender and Social Justice.

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