



# AAG

Australian  
Association of  
Gerontology



**A FAIR FUTURE  
FOR OLDER  
WOMEN WHO  
EXPERIENCE  
SEXUAL ABUSE**

**WHAT NEEDS  
TO BE DONE**

Report of the Australian Association of Gerontology  
Workshop and Policy Recommendations

Workshop facilitated and led by  
Dr Catherine Barrett, OPAL Institute held in  
Melbourne, Victoria on 20 November 2018

Report launched on 22 July 2019

# ACKNOWLEDGEMENTS

## ACKNOWLEDGEMENT OF COUNTRY

Australian Association of Gerontology (AAG) acknowledges Traditional Owners of Country throughout Australia and recognises the continuing connection to lands, waters and communities. We pay our respect to Aboriginal and Torres Strait Islander cultures, and to Elders past, present and emerging, and to all Aboriginal and Torres Strait Islander peoples including members of the Stolen Generations. For further information see AAG's Aboriginal and Torres Strait Islander Ageing Advisory Group (ATSIAAG)



## SPONSOR

Funded by the Australian Government through the Dementia and Aged Care Services Fund



**Australian Government**  
**Department of Health**

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### Content warning

This paper discusses sexual abuse of older women, which may be emotionally challenging to engage with. If you are impacted by the content and need some support, you can call:

#### 1800 RESPECT

National sexual assault and domestic violence counselling service

#### 1300 22 4636 Beyond Blue

Support for anxiety, depression and suicide prevention

#### 13 11 14 Lifeline

Crisis support and suicide prevention

#### 1800 184 527 Q Life

LGBTI peer support and referral

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## EXECUTIVE SUMMARY

This paper considers better ways to prevent and respond to the sexual abuse of older women at home and in residential aged care by:

- ▶ Providing background information about the definitions of sexual abuse (and other related terms) and estimates of the prevalence of sexual abuse (in Australia and worldwide).
- ▶ Reviewing the policy context in Australia, including:
  - the policy framework pre-March 2019
  - the various policy reviews conducted since 2011
  - recent policy developments post-March 2019
- ▶ Reviewing the research context in Australia, including:
  - plans for a prevalence study
  - need for literature reviews
  - plans for an agreed set of national research priorities
- ▶ Reporting on the outcomes of the AAG pre-conference workshop held in November 2018, including:
  - presentations
  - reflections from workshop participants
  - evaluation of the workshop
- ▶ Providing a list of policy recommendations to assist governments to implement the National Plan to Respond to the Abuse of Older Australians and to assist the Royal Commission into Aged Care Quality and Safety.

## ABOUT US

### Australian Association of Gerontology (AAG)

Since 1964, the Australian Association of Gerontology (AAG) has been Australia's peak national body linking researchers, educators, policymakers, practitioners and other experts engaged in ageing issues. With over 1400 members across every State and Territory in Australia, our members include researchers, geriatricians, nurses, allied health professionals, aged care practitioners, policy makers, consumer representatives and other experts in ageing. AAG has 18 Collaborating Research Centres that represent all major research in ageing in Australia.

**AAG's purpose is to improve the experience of ageing through CONNECTING RESEARCH, POLICY and PRACTICE**

### OPAL Institute

The OPAL (Older People And SexuaLity) Institute was launched in 2016 to promote of the sexual rights of older people. The Institute develops resources, conducts research, disseminates information, empowers older people and service providers, and advocates for change.

In February 2018 the OPAL Institute launched The Power Project, a national resource empowering service providers, older women and community members to prevent sexual abuse of older women. Further information is available on the website <https://www.opalinstitute.org/power-project.html>

The OPAL Institute was founded by Dr Catherine Barrett, a long-time advocate for the sexual rights of older people. As Director Catherine works with an Executive Team of older people who shape the approach taken and the work undertaken. Catherine was a Human Rights Medal finalist in the 2018 Human Rights Awards. She is the AAG 2019 Glenda Powell Travelling Fellow.

## BACKGROUND

### Introduction

There has been little focus on older women's experience of sexual abuse despite research showing that:

- ▶ in 2016, 12,700 Australian women aged 55 years and over reported experiencing sexual violence in the last 12 months (1)
- ▶ in 2017-18, there were 547 reports of unlawful sexual contact in residential aged care in Australia (2)

This can partly be attributed to the misconception that sexual abuse of older women is rare. It is more accurate to say older women rarely report sexual abuse – because we do not listen or give them permission to speak about their sexual abuse.

This paper considers better ways to prevent and respond to the sexual abuse of older women at home and in residential aged care by:

- ▶ reviewing the policy and research context in Australia
- ▶ reporting on the outcomes of the AAG pre-conference workshop held in November 2018
- ▶ developing a list of policy recommendations to:
  - assist governments to implement the National Plan to Respond to the Abuse of Older Australians and
  - assist the Royal Commission into Aged Care Quality and Safety.

## DEFINITIONS

### Elder abuse

The World Health Organisation defines elder abuse as "a single or repeated act, or lack of appropriate action, occurring within any relationship where 'there is an expectation of trust which causes harm or distress to an older person.'"(3)

### Sexual abuse

Elder abuse is generally divided into categories, of which sexual abuse is one. The World Health Organisation defines sexual abuse as "non-consensual sexual contact of any kind with an older person."<sup>1</sup>(3)

The National Plan to Respond to the Abuse of Older Australians (2019-2023) defines sexual abuse as "any sexual behaviour without a person's consent. It includes sexual interactions and non-contact acts of a sexual nature."<sup>1</sup>(4)

The Seniors Rights Victoria research paper Older, Better, Together: The Primary prevention of elder abuse by prevention networks (2019) defines sexual abuse as:

"Actions including rape and sexual assault, as well as a range of unwanted sexual acts such as sexual contact, language or exploitative behaviour where the older person's consent was not obtained or where consent was obtained through coercion. This includes abuse that is a continuation of intimate partner violence that has occurred throughout life, or abuse that has manifested in older age."<sup>1</sup>(5)

However, Seniors Rights Victoria noted that there is a low level of understanding about sexual abuse among service providers. The research paper stated:

"While sexual abuse is within the definition of elder abuse, most of the professional representatives who contributed to this research expressed a low level of understanding of this type of elder abuse. There are known instances of older women seeking help for sexual abuse being advised by elder abuse services that they cannot provide assistance. The stereotype that older women are not sexually desirable acts as a barrier to older women reporting the abuse or being believed by others. The incorrect perception that older age is a protective factor against sexual abuse also acts against awareness and prevention

<sup>1</sup> Non-contact acts could include things like masturbating or threats.

activities. Family violence organisations report that women experience higher rates of sexual violence than men.

While professionals were aware of and able to cite examples of all types of elder abuse occurring, there were only a small number of professionals who had awareness of or the knowledge to provide a perspective on sexual abuse.”(5)

**In this paper, we have chosen to use the term ‘sexual abuse’ as a generic term to refer to any act of sexual abuse, sexual assault, unlawful sexual conduct or sexual misconduct.**

### Sexual assault

There are a variety of sexual offences in criminal law (for example, rape, sexual assault and indecent assault). The term sexual assault may have differing legal definitions in each state and territory. Colloquially, within the aged care sector term sexual assault is sometimes used to refer to acts by a stranger, while sexual abuse is used for acts by a family member or known service provider.

However, it is important to remember that most sexual violence against women is not perpetrated by a stranger, but by men they know. This point was articulated powerfully in a recent article ‘The Danger of the Monster Myth’ by Tom Meagher.(6) See further information in the section below on prevalence.

### Unlawful sexual contact (compulsory reporting)

The term ‘unlawful sexual contact’ relates to **compulsory reporting by government-funded residential aged care facilities** under s.63-1AA of the Aged Care Act 1997. (7) Further information about compulsory reporting is provided later in this paper in the section on policy context. The Department of Health website states that **“unlawful sexual contact refers to non-consensual sexual activity involving residents in aged care facilities.”** (8)

### Sexual misconduct (mandatory reporting)

The term ‘sexual misconduct’ relates to mandatory reporting by registered health practitioners of “sexual misconduct in the practice of the profession” under the Health Practitioner Regulation National Law Act 2009. (9) This is different to compulsory reporting (discussed above).

## DIMINISHED CAPACITY

It is important to acknowledge that both victims and perpetrators of sexual abuse can have diminished capacity. This may be a relevant factor in how we define, prevent and respond to sexual abuse. The Seniors Rights Victoria research paper Older, Better, Together: The Primary prevention of elder abuse by prevention networks (2019) noted that:

“Perceived or real diminished capacity

Diminished capacity can be a factor in all types of elder abuse. Diminished capacity can occur in older people for a number of reasons such as cognitive impairment resulting from dementia, Alzheimer’s disease or an adverse event, for instance a stroke, a disability or physical or emotional frailty. Those with expertise in sexual abuse noted that **older women with cognitive impairment are targeted by perpetrators of sexual abuse.**”(5)

## PREVALENCE

### Summary

Previous studies have found there is a lack of evidence regarding the nature and extent of sexual abuse of older people in Australia. (10)(11) Under the National Plan to Respond to the Abuse of Older Australians 2019-2023, the first national prevalence study on elder abuse will commence in 2019).(4) See further information in the section below on research

**Table 1** is a summary of currently available prevalence data that we have located. It is important to note that the data represents only sexual abuse that has been reported. However, experts believe that there is significant underreporting.(12)

Location	Type	Prevalence of reports	Year
Worldwide	Sexual abuse in community settings	0.9%	Past 12 months
Worldwide	Sexual abuse in institutional settings	1.9%	Past 12 months
Australia	Unlawful sexual contact in residential aged care 2008-2018	1.19 to 2.26 per 1000 residents (256-547 incidents per year)	2008-2018
Australia	Sexual violence (assault and threat) against women aged over 55	0.4% (12,700 women)	2016
Victoria	Sexual offences against women aged over 65	0.5% (696 offences)	2010-2016

**Table 1:** Sexual abuse of older people

### Sexual abuse of older people worldwide

A 2017 systematic review on elder abuse prevalence in community settings reviewed 52 studies from 28 countries to report on the prevalence and types of elder abuse. (13) The pooled prevalence rate for sexual abuse of older people in community settings was 0.9%.(13) This data relates to older people living in private and community settings and does not include people in institutional care or those with a cognitive impairment.

A 2018 systematic review on elder abuse in institutional settings reviewed nine studies from various countries (excluding Australia) estimated the prevalence of sexual abuse of older people in institutional settings at 1.9% (reported by older adults) and 0.7% (reported by staff).(2)

### Unlawful sexual contact in residential aged care in Australia

Each financial year the Minister presents to Parliament a Report on the Operation of the Aged Care Act. (1) Table 2 is a summary of the data from the past six years about reportable assaults in residential aged care. This data does not include people living in private and community settings; people living in aged care services that do not receive government funding; or acts committed by a co-resident with cognitive impairment.

Year	Total number of reportable assaults	Type of assault		Number of people in residential care
		Unreasonable use of force	Unlawful sexual contact or both	
2017-18	3,773	3,226	547	241,723
2016-17	2,853	2,463	390	239,379
2015-16	2,862	2,422	440	234,931
2014-15	2,625	2,199	417	231,555
2013-14	2,353	1,983	370	231,515
2012-13	2,256	1,878	378	226,042

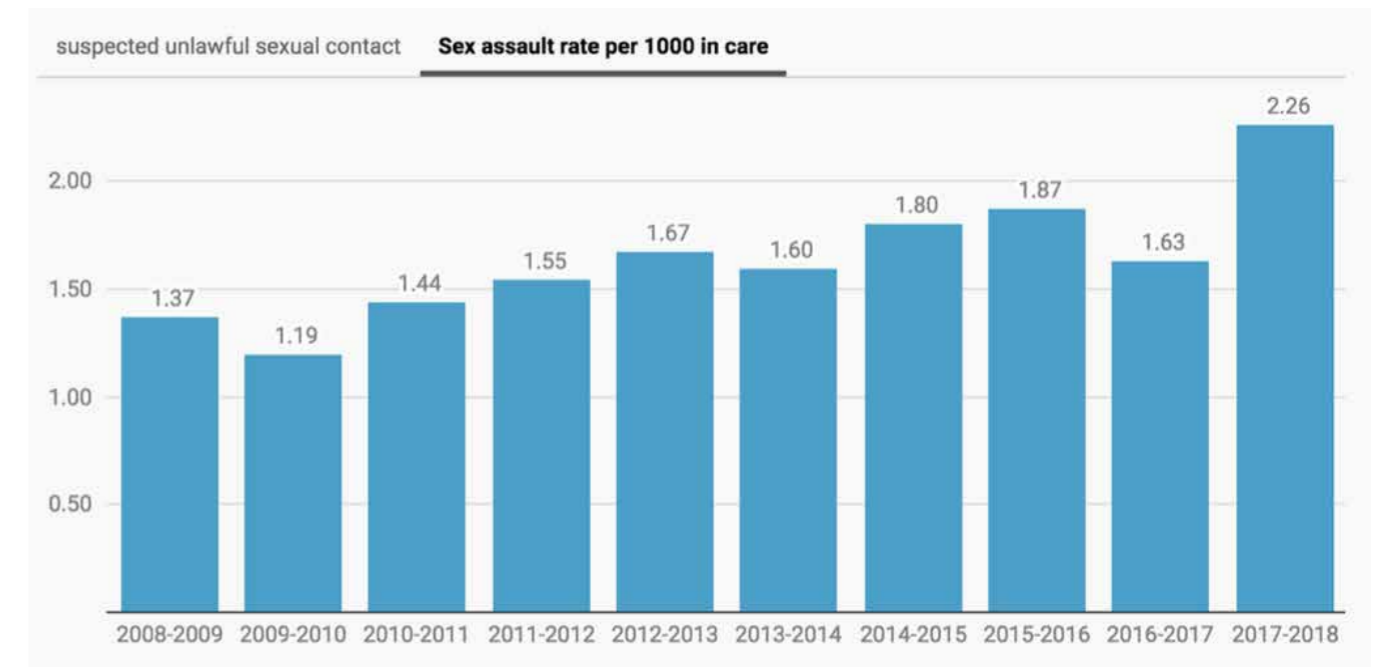
**Table 2:** Reportable assaults against people in residential aged care 2012-2018 (14)



**Table 3** shows the **rate** of alleged unlawful sexual contact incidents per 1000 aged care residents, over the past ten years.

### Alleged unlawful sexual contact incidents

Reportable incidents by year in Australian aged care homes



**Table 3:** Rate of incidents of unlawful sexual contact in residential aged care 2008-2018

\* A reportable incident is defined as: Unlawful sexual contact, meaning any sexual contact with residents where there has been no consent.

Source: Department of Health - Get the data

EMBED: Sexual assaults in aged care Australia

## Sexual violence against older women in Australia

In 2019, the Social Research Policy Centre analysed Australian Bureau of Statistics datasets to identify what is known about abuse of older people in Australia and data gaps.(11) Analysis of the Personal Safety Survey showed:

- ▶ in 2012, 0.1% Australian women aged 55 years and over reported experiencing sexual violence (assault or threat) in the last 12 months. This represented 8,000 women.
- ▶ in 2016, 0.4% Australian women aged 55 years and over reported experiencing sexual violence (assault or threat) in the last 12 months. This represented 12,700 women.(11)

## Sexual offences against people aged over 65 in Victoria

The Crimes Statistics Agency recently released the following data on Crimes Against Older People in Victoria that were recorded by Victoria Police over the ten years to 31 December 2017.(10) This data only includes offences against people aged over 65 that were reported to police and met the definition of criminal offences.

- ▶ There were **696 sexual offences (0.5%)** out of a total 141,335 offences against older Victorians.
- ▶ Of those 696 sexual offences, 26 (3.7%) were committed by a current partner; 7 (1%) by a former partner; 17 (2.4%) by another family member; **332 (47.7 %) were committed by another known person (with further examination revealing 29.5% of these cases were committed by a co-resident (n=98); 173 (24.9%) by a person not known to the victim; and 141 (20.3%) by an unknown person.**
- ▶ **Sexual offences had the largest proportion of victims aged 85 years and over**, with this age group accounting for 33.9% of incidents.
- ▶ **401 (57.6%) of sexual offences took place in a nursing home or health care facility;** 204 (29.3%) in a residential setting; 44 (6.3%) in the community; 31 (4.5%) in another place; and 16 (2.3%) in an unknown place.(10)

While the data presented in this section demonstrates that the sexual abuse of older women is a problem – it is important to note that there is likely to be significant under reporting. Research has shown that older women are often reluctant to report sexual abuse, for a multitude of reasons, and this reticence is compounded by the lack of permission to speak about sexual abuse. (15)

## POLICY FRAMEWORK (PRE-MARCH 2019)

### National incident reporting (compulsory reporting) - Aged Care Act

Under s.63-1AA of the Aged Care Act 1997, approved providers of residential aged care must report to the Police and the Department of Health every incident of an alleged or suspected 'reportable assault'. (7) Reportable assaults include both unreasonable use of force and 'unlawful sexual contact' with a resident of an aged care home. The Department of Health website states that:

**"Unlawful sexual contact refers to non-consensual sexual contact involving residents in aged care facilities. Reporting requirements under the law are designed to protect vulnerable residents, not to restrict their sexual freedom... Approved providers do not need to report when the alleged assault is perpetrated by a resident with an assessed cognitive or mental impairment, and care arrangements are put in place to manage the behaviour within 24 hours" (8)**

### National staff screening – Accountability Principles

Police check requirements were implemented in 2007 and strengthened in 2009 to protect the safety of aged care recipients. (16) The police check requirements are set out in Part 6 of the Accountability Principles 2014 made pursuant to the Aged Care Act 1997.(17) Essentially, staff of approved providers must have police certificate, which is current for three years. A person who has a conviction for sexual assault, or any other form of assault where the sentence included a term of imprisonment, is unable to be employed or volunteer in aged care. (17) However, it is important to note that recent research has found that some assaults were not reported to police; that conviction rarely occurred; and there were gaps in information sharing between states and territories. (15) Consequently Police checks may fail to capture service providers who perpetrate sexual abuse.

Where the police certificate discloses something that is not an outright bar to employment, the Department of Health Police Certificate Guidelines help providers assess the information. The guidelines state that:

**"police checks are intended to complement robust recruitment practices and are part of an approved provider's responsibility to ensure all staff and volunteers are suitable to provide care to the aged. Approved providers are also responsible for having appropriate systems and processes in place in relation to visitors, health professionals and contractors" (16)**

### State and territory laws and policies

Laws relating to the protection of adults are primarily state and territory based, though they do not necessarily cover all aspects of elder abuse (18) This includes (but is not limited to) laws relating to criminal justice (e.g. sexual offences) and cognitive or mental impairment (e.g. guardianship laws). Most states and territories also have established policy frameworks for the prevention of and response to elder abuse. (19)



## POLICY REVIEWS

### Caring for Older Australians (2011)

In 2010-2011, the Productivity Commission conducted an inquiry to systematically examine the social, clinical and institutional aspects of aged care in Australia. The Commission's final report *Caring for Older Australians* was published in August 2011.(20) The Commission noted that:

- ▶ "Residential aged care facilities must report incidents or allegations of [unlawful sexual contact]..."
- ▶ Police check arrangements are also in place to prevent unsuitable people from working in aged care services...
- ▶ During 2009-10 DoHA received notification of 1488 alleged reportable assaults – 1232 were recorded as alleged unreasonable use of force, 239 as alleged unlawful sexual contact, and 17 as both."(20)

After seeking and considering stakeholder views on whether a review of compulsory reporting was warranted, the Commission concluded:

**"Best practice principles suggest a review of the current [compulsory] reporting of assaults should occur at some future stage but there is not enough evidence to suggest that this is an immediate priority."** (20)

### Elder Abuse - A National Legal Response (June 2017)

In 2016-2017, the Australian Law Reform Commission (ALRC) was asked to consider Commonwealth laws and legal frameworks and how they might better protect older persons from abuse. In August 2016, the OPAL Institute made a submission to the ALRC on sexual abuse of older women. (21)

The ALRC specifically considered the compulsory reporting requirements under the Aged Care Act 1997 and in June 2017 the ALRC **recommended establishing a new serious incident response scheme for aged care.** Under the new scheme:

- ▶ 'serious incident' would include sexual abuse:
  - committed by another resident, whether or not the person committing the act is cognitively impaired
  - committed by a staff member against a care recipient in home or flexible care.
- ▶ the emphasis would change from requiring providers to report the occurrence of an alleged or suspected assault, to requiring an investigation and response to incidents by providers.
- ▶ The provider's investigation and response should be monitored by an independent oversight body. (22)

The ALRC also considered staff screening requirements under the Accountability Principles 2014 and recommended that they be strengthened in the following ways:

- ▶ **Unregistered aged care workers who provide direct care should be subject to the planned National Code of Conduct for Health Care Workers** (which was agreed by Council of Australian Governments in 2015 but is to be implemented by state and territory legislation).
- ▶ There should be a national employment screening process (conducted by an independent organisation) to determine whether a clearance should be granted to a person to work in aged care, based on an assessment of:
  - a person's criminal history;
  - relevant incidents under the recommended serious incident response scheme;
  - relevant disciplinary proceedings or complaints. (22)

The ALRC did not recommend any additional criminal offences relating specifically to elder abuse.(18)

### Review of National Aged Care Quality Regulation Processes (October 2017)

In October 2017, the Review of National Aged Care Quality Regulation Processes Report (the Carnell-Paterson Review) again recommended that a new serious incident response scheme be implemented.(23)

### Royal Commission into Aged Care Quality and Safety (2018 - ongoing)

The Royal Commission into Aged Care Quality and Safety was established on 8 October 2018. (24) The revised Letters Patent made on 6 December 2018 outline the Commission's terms of reference. The Honourable Richard Tracey AM RFD QC and Ms Lynelle Briggs AO were appointed as Royal Commissioners and hearings commenced on 18 January 2019. The Commissioners are required to provide an interim report by 31 October 2019, and a final report by 30 April 2020.(24)

As at the time of writing, the Commission had not yet announced a focus on issues relating to the sexual abuse of older women. However, the issue was addressed by Professor Joseph Ibrahim, Head of Health Law and Ageing Research Unit, Monash University during his oral evidence on 16 May 2019.(12) Professor Ibrahim's evidence included:

- ▶ Sexual abuse is hidden in the community and it is invisible in aged care. No one wants to believe it occurs.
- ▶ Given that two-thirds of residents have some form of cognitive impairment, it makes no sense to exclude reporting of sexual abuse by people with dementia.
- ▶ There has been no accounting by the Department of Health for 10 years about what they have done with the reports on sexual abuse, apart from annual reporting on the number of incidents.
- ▶ When reports are made, the police rarely proceed with it.
- ▶ The international research mostly comes out of the United States and is very thin because it is not a subject area that people want to fund and it is difficult to get ethics approval.(12)

### Strengthening protections for older Australians (February 2019 - ongoing)

In the 2018-19 Budget, the Australian Government announced in that it would develop options for a serious incident response scheme, in consultation with the aged care sector. The Department of Health engaged KPMG to undertake stakeholder consultation and develop a report outlining options for Government consideration.

The report *Strengthening protections for older Australians - Development of models and options for a Serious Incident Response Scheme* dated February 2019 explores five options, without making a recommendation about the preferred option. It proposes a phased implementation, with a 'go live' date of 1 July 2022. (25) As at the time of writing, the Government had not yet responded to the proposed options.

### State and territory policy reviews

New South Wales, South Australia and Western Australia have completed specific reviews into elder abuse. All three completed reports express support for a national approach to elder abuse.

In Victoria and Queensland, the issue of elder abuse was also considered by inquiries into family violence. (19)



## POLICY DEVELOPMENTS (POST-MARCH 2019)

### National Plan to Respond to the Abuse of Older Australians (March 2019)

The National Plan to Respond to the Abuse of Older Australians was launched on 19 March 2019.<sup>(4)</sup> The purpose of the plan is to provide a framework for action over the next four years to respond to elder abuse. It sets out the commitment of the Australian government and each of the eight state and territory governments to work together on areas that would benefit from national collaboration (4) The National Plan outlines 13 key tasks under five priority areas of action:

1. Enhancing our understanding
2. Improving community awareness and access to information
3. Strengthening service responses
4. Planning for future decision making
5. Strengthening safeguards for vulnerable older adults.<sup>(4)</sup>

The National Plan defines sexual abuse but does not include any specific initiatives to target sexual abuse. However, many of the key tasks outlined in the plan are relevant to preventing and responding to sexual abuse, including:

- ▶ Conduct a national prevalence study on abuse
- ▶ Develop an agreed set of national research priorities
- ▶ Improve our ability to share learnings from existing programs
- ▶ Develop a communications strategy to increase understanding and awareness of abuse
- ▶ Start building a knowledge hub to consolidate information and resources about abuse
- ▶ Establish and evaluate front-line support services for people experiencing abuse
- ▶ Continue to reform the Commonwealth's regulatory framework for aged care to protect consumers.

The companion document Everybody's Business: Stocktake of elder abuse awareness, prevention and response activities in Australia describes the work already underway across Australia as at March 2019.<sup>(19)</sup> It lists very little work currently underway that is specifically about sexual abuse of older women. See further information about work that we are aware of in the section on literature review.

The Council of Attorneys-General (CAG) has requested that jurisdictions develop an implementation for the National Plan by the first CAG meeting in 2019.<sup>(19)</sup>

### Charter of Aged Care Rights (July 2019)

The Charter of Aged Care Rights (the Charter) was launched on 22 March 2019 and comes into effect from 1 July 2019.<sup>(26)</sup> The Charter will apply to consumers once they start receiving Australian Government funded aged care, including:

- ▶ residential care
- ▶ home care packages
- ▶ flexible care
- ▶ services provided under the Commonwealth Home Support Programme and the National Aboriginal and Torres Strait Islander Flexible Aged Care Program.

The Charter contains 14 rights, and the fourth one is the most relevant to sexual abuse of older women. It states:

**'I have the right to live without abuse and neglect'**

### Aged Care Quality Standards (July 2019)

The delivery of safe aged care services is built into the Aged Care Quality Standards, which are contained in the Quality of Care Amendment (Single Quality Framework) Principles 2018. <sup>(27)</sup> The standards come into effect from 1 July 2019. The Aged Care Quality and Safety Commission will monitor and assess aged care providers based on the quality of the service experienced by consumers.

The Quality Standards that are most relevant to sexual abuse of older women are:

#### Standard 5 - Organisation's service environment

**Consumer outcome: I feel I belong and I am safe and comfortable in the organisation's service environment.**

#### Standard 6 - Feedback and complaints

**Consumer outcome: I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.**





## RESEARCH CONTEXT

### National Plan

The National Plan to Respond to the Abuse of Older Australians (launched in March 2019) includes three key tasks that are relevant to research:

- ▶ Conduct a national prevalence study on abuse
- ▶ Start building a national online knowledge hub for information and resources
- ▶ Develop an agreed set of national research priorities. (4)

### Prevalence study

Since 2016, the Australian Government has funded a national research agenda on the abuse of older people to improve understanding of the dynamics and drivers of elder abuse.(4) Planned research outputs include:

- ▶ The Australian National Prevalence Study on Elder Abuse, which will comprise two national surveys, one of older people and one of the general community. The study aims to arrive at a prevalence estimate by 2020.
- ▶ Insights into abuse of older people, based on analysis of Australian Bureau Statistics data sets (completed 2019 (11))
- ▶ Insights into the vulnerability of older Aboriginal and Torres Strait Islander peoples. (19)

In September 2018, Dr Catherine Barrett wrote to the Attorney-General about sexual abuse of older women. The Attorney-General asked the Attorney-General's Department to reply on his behalf. In a letter dated 25 September 2018, the Director of the Elder Abuse Team said:

**"Sexual abuse is a recognised form of older abuse and [the national prevalence study] will encompass data collection in relation to its prevalence. However, we do note that there may be difficulties in collecting a sufficiently large number of responses on the experience of sexual abuse by older people to develop robust measures of its prevalence." (28)**

### Literature review

It was beyond the scope of this paper to conduct a literature review of available research on sexual abuse of older women. Indeed, even the Australian Government's comprehensive report Everybody's Business: stocktake of elder abuse awareness, prevention and response activities in Australia (2019) does not include a literature review.(19) Instead, it draws attention to resources that offer an introduction to research on elder abuse.

Few of the research-related resources listed in Everybody's Business appear to have a significant focus on sexual abuse of older women. Some resources listed that appear to be relevant are:

1. Australian Institute of Family Studies (AIFS) Library Database: The AIFS library collects material on elder abuse and maintains a publicly available annotated bibliography. The AIFS library collects published research as well as other material, such as community sector reports, evaluations and government reviews. At the time of writing, nearly 400 items are available online to the general public. The AIFS bibliography and catalogue can be accessed via <https://aifs.gov.au/cfca/bibliography/elder-abuse> (19)
2. National Audit and Operational Framework for Keeping Women Safe in the Homes: The Australian Government has provided funding to the Gendered Violence Research Network (UNSW) to undertake a national audit and develop an operational framework for keeping women safe in their homes. Further funding has been provided to extend the project to include a focus on older women, aged 50 years and over.(19)
3. Seniors Rights Victoria discussion paper Elder Abuse, Gender and Sexuality (2018) includes a discussion of sexual assault of older women.(19)
4. The Power Project: a national resource empowering older women, service providers and community members to prevent sexual abuse of older women.<sup>2</sup> The Power Project was founded in February 2018 by Dr Catherine Barrett, Director of The OPAL Institute. The Power Project will include the following stages:
  - Establish an online resource
  - Undertake community awareness campaign
  - Develop guidelines for responding to and preventing sexual abuse
  - Deliver education for service providers
  - Document older women's stories of sexual abuse. (29)

The Power Project is available at <https://www.opalinstitute.org/power-project.html>

<sup>2</sup> The Power Project is listed as a community-based and peer-led initiative in Everybody's Business (19)

We are also aware of the following Australian research and resources that are relevant to sexual abuse of older women:

1. **Older, Better, Together: A network approach to preventing elder abuse before it happens (2019):** This action research project was commissioned by Seniors Rights Victoria and includes consideration of sexual abuse.(5)
2. **Draft Australian Elder Abuse Screening Instrument (2019):** The National Ageing Research Institute has drafted a screening tool that includes indicators for sexual abuse.(30)
3. **AAG Pre-Conference Workshop** (to be held on 5 November 2019) on Unlawful Sexual Contact: Compliance Resourcing and Prevention: This workshop will review a new one-hour training program on responding to and preventing unlawful sexual contact in residential aged care.(31)
4. **The epidemiology of sexual assault of older female nursing home residents (2019):** Professor Joseph Ibrahim et al examined 28 cases of sexual assault of women over 65 residing in nursing homes in Victoria, who were referred to a forensic medical examination. Median age of victims was 83 and most had cognitive impairment. Perpetrators were all male and equally comprised of direct care staff and co-residents.(32)
5. **Older women's right to be safe at home and in care (2019):** the Australian Research Centre in Sex, Health and Society (La Trobe University) partnered with COTA Victoria on a project funded by the Victorian Women's Benevolent Trust to address the rights of older women to be safe from sexual assault at home and in care. The project team conducted interviews and an online survey of aged care service providers in Victoria to document their strategies for preventing the sexual assault of older women. This data on 'good practice' was used to form the basis of a resource for the education of service providers about real strategies for change and a strategy to prevent the sexual abuse of older women in Victoria. (33)



**6. Frontline service providers' views on current screening tools for elder abuse (2018):** Luke Gahan et al (National Ageing Research Institute) conducted a rapid review of existing validated screening tools and presented five tools to focus groups of 23 health professionals, to assess their relevance. None of the tools were deemed suitable for use in their practice by participants.(34)

**AAG Webinar on preventing sexual abuse of older women (2018):** This webinar drew on the evidence to frame a case study exploring the role of aged care service providers in preventing sexual abuse – and provides practical strategies for service providers who work with older women.(35)

**7. Challenging misconceptions about sexual offending (2017):** The Australian Institute of Family Studies was commissioned by Victoria Police to create this evidence-based resource for police and legal practitioners. It contains a section on older women and sexual offences.(36)

**8. AAG RM Gibson Research Fund Grant (2017):** AAG awarded this grant to Susan Banks (University of Tasmania) for a research project on Exploring the dimensions of the sexual abuse of older women: An interdisciplinary investigation of the attitudes and responses of Tasmanian senior agency and organisation personnel with responsibility for elder abuse policy development and implementation.(37)

**9. Sexual assault of older people: Information for carers and health care workers (2017):** This resource was developed the South Eastern Centre Against Sexual Assault and Family Violence for family, friends and workers.

**10. Wellbeing and safety - body mapping (2015):** This small pilot study explored ways of opening up conversations with older women about sexual wellbeing, safety and assault. The pilot was initiated in response to feedback that older women who experience sexual assault are reluctant to talk about their experiences. (38)

**11. Norma's Project (2014):** Norma's Project was a three-year project, launched in 2012 to prevent the sexual assault of older women in Australia. This project was the first national project to address primary prevention of the sexual assault of older women. The project researchers conducted interviews and a survey. Over 95 people provided information, including 65 stories about the sexual assault of older women. (15)

**12. Stop sexual violence: It's never too late (2002):** This resource was developed by the Gold Coast Sexual Assault Support Service for older women who have been sexually abused. (39)

Prior to developing an agreed set of national research priorities for elder abuse, it is essential to conduct appropriate literature reviews on sexual abuse of older women. Appropriate reviews could include:

- **Scoping review:** to scope the nature and extent of existing research and to identify gaps in the evidence base that could be addressed by future research.
- **Systematic review:** to appraise and synthesise the available research evidence to determine what is known; recommendations for policy and practice; what remains unknown; uncertainty around findings; and recommendations about priorities for future research and primary prevention.

## Knowledge Hub

The Attorney-General's Department has allocated funding to establish an Elder Abuse Knowledge Hub. In 2018, it funded Elder Abuse Action Australia to conduct a feasibility study into the hub, including community consultation organisations and older people. In 2019, the Australian Government will seek to engage a suitably qualified organisation, or group of organisations, to establish the hub.(19)

## Future research priorities

Pending the results of a literature review, it appears that the research on sexual abuse of older women is thin (based on our own investigations in preparing this paper and the evidence given by Professor Joseph Ibrahim to the Royal Commission).(12) Research about sexual abuse of older women (in both institutional and community settings) should be a future research priority.

## WORKSHOP PROCEEDINGS

AAG's pre-conference workshop, A Fair Future for Older Women who Experience Sexual Abuse, aimed to engage participants in exploring better ways to prevent and respond to the sexual abuse of older women. Further information is provided in the workshop flyer at Appendix 1.

The workshop was hosted by Dr Catherine Barrett (Director, OPAL Institute) and sponsored by the Department of Health. It was held on Tuesday 20 November 2018 from 9.30 am to 12.30 pm at the Melbourne Convention Exhibition Centre. The workshop preceded the 51st AAG Conference which commenced the following day. This event was free for invited participants.

Twenty-five people attended the workshop. Participants included aged care consumers, researchers, service providers (aged and health care, family violence, sexual assault and legal), peak bodies and advocacy groups and family members.

This workshop began by outlining evidence on the sexual abuse of older women. Then participants heard from 96-year-old Margarita Solis (film) about the impacts of sexual abuse and how service providers transformed her life. Next a series of short interdisciplinary presentations outlined a range of perspectives on addressing sexual abuse of older women. The final part of the workshop engaged participants in considering better ways to prevent and respond to sexual abuse of older women.

## PRESENTATIONS

The workshop began with an Acknowledgement of Country, a trigger warning and some strategies for self-care.

### Overview of evidence

Dr Catherine Barrett (Director OPAL Institute) presented an overview of the evidence, including definitions, prevalence, reflections on Norma's Project; take up in Elder Abuse prevention and family violence strategies, Royal Commission into Aged Care; and comparison with evidence internationally. Some of the policy and practice issues raised by the evidence included:

- ▶ Barriers to older women reporting
- ▶ The influence of ageism on preparedness to listen
- ▶ The ways in which older women are silenced
- ▶ The capacity of service providers to prevent sexual abuse and transform older women's lives
- ▶ The need to resource service providers to prevent and respond to sexual abuse.

### Margarita's film

A 20-minute film was shown in which 96-year-old Margarita Solis notes she experienced sexual abuse and then describes the immediate difficulties she encountered in being heard and the transformation of her life when she was heard. The film shows how service providers can transform the lives of older women when they listen.

The film is available to watch online at <https://www.opalinstitute.org/margarita.html>

### Expert perspectives

The next segment of the workshop was a series of five-minute presentations by experts in the field and other key stakeholders who were asked – in relation to sexual abuse of older women:

- ▶ what do you see?
- ▶ what needs to change?

### Jill Bolen (former Chief Superintendent, Queensland Police Service)

Jill Bolen has given Margarita significant support in the aftermath of her abuse. Jill provided reflections on the film and insights into how to respond to disclosures of sexual abuse, including:

- ▶ Listen actively and clarify what they are saying as they may use different language
- ▶ Reassure them it is not their fault
- ▶ Make good notes
- ▶ Empower them to decide what they want done about the abuse
- ▶ Don't be frightened to take on people in 'the system.'

**Don't be frightened to take on people in 'the system'**

**Di MacLeod (Director, Gold Coast Centre Against Sexual Violence)**

- ▶ Sexual abuse of older women does happen, and it is not rare.
- ▶ We are not comfortable acknowledging it happens and addressing it (ageism and sexism play a role in this)
- ▶ Sometimes sexual abuse in the home is family violence that has continued into older age
- ▶ Safety is a basic human right
- ▶ We need to actively ensure that sexual abuse is considered in inquiries and reviews, particularly intervention (clear reporting and timely responses) and prevention.

**Dr Luke Gahan (Research Fellow, National Ageing Research Institute)**

- ▶ We need a national Charter of Rights of Older Persons
- ▶ We need a good screening tool to identify elder abuse<sup>3</sup>
- ▶ The screening tool needs to be co-designed with older people and service providers
- ▶ Many people will not report abuse unless they are asked
- ▶ The tool needs to be useful for screening people with cognitive impairment
- ▶ Service providers need training, so they are comfortable doing screening for abuse.

**Professor Joseph Ibrahim (Health Law and Ageing Research Unit, Monash University) – by telephone link**

- ▶ Monash University has just published a systematic review on sexual assault of older women in nursing homes and also completed a study examining cases of sexual violence reported to the Clinical Forensic Medicine unit in Melbourne. (40) (32)
- ▶ The team at Monash reviewed 15 years of files, they were surprised to find only 28 cases reported to Police where a forensic medical examination was done
- ▶ Most victims had cognitive impairment
- ▶ There was little information about post-assault care and there appears to be minimal follow-up for the victim after the assault to keep them safe
- ▶ The Commonwealth Department of Health have had data on sexual assaults since 2008—these are part of a compulsory reporting system for Residential Aged Care. Collated over 10 years this would equate to thousands of cases. There are not any collated reports or analyses of these events and there has not been any policy response or capacity building to change the way we address sexual violence.
- ▶ Professor Ibrahim and his team consider the number of reported sexual assaults are much, much lower than what is actually happening.

**Carolyn Worth (Manager, South East Centre Against Sexual Assault, Victoria)**

- ▶ The South Eastern Centre Against Sexual Assault is part of a network of 14 CASAs across Victoria.
- ▶ Last year CASAs saw 3647 people and 64 of them were women aged over 60. The oldest was 100.
- ▶ ABS data says only 1 in 10 victims report sexual assault. It is probably even lower for older people. But choosing not to report is also a valid option.
- ▶ Victims of sexual assault by a partner never say they been 'raped.' They say 'he pressures me' or 'he's a nuisance.' Language is an issue
- ▶ We need to raise this with the Royal Commission into Aged Care
- ▶ We should ask for dedicated workers in CASAs to support older people

**Safety is a basic human right**

**Dominique Horne (Elder Abuse Consultant, Better Place Australia)**

- ▶ There is a lack of access to meaningful support services for older women who have been sexually abused
- ▶ We need a joined-up response for victims instead of having to cobble together services
- ▶ Family violence services need to consider issues of intersectionality and the needs of older women
- ▶ Always be ready to listen as disclosure of sexual abuse might come out as part of another story
- ▶ Don't presume they need a particular type of support, listen to what they actually want.

**Men need to be having these conversations but I'm the only one in this room**

**Detective Sergeant Leemara Fairgrieve (Westgate Sexual Offences and Child Abuse Investigation Team, Victoria Police)**

- ▶ Victoria Police have been using a risk screening tool for family violence incidents, that includes the question 'has your partner ever sexually assaulted you?'
- ▶ Police need to be called at the earliest opportunity after sexual assault incidents so they can collect forensic evidence; interview witnesses; and arrange medical treatment for the victim. This doesn't mean that a prosecution has to follow, but avoids evidence being lost
- ▶ Family violence sexual assaults are generally not reported until many years later
- ▶ We need to:
  - Give control back to victims
  - Ensure they are safe.
  - Refer them to appropriate agencies.

**We need to make people care enough to act**

**We should ask for dedicated workers in CASAs to support older people**

**Susan Banks (Lecturer, School of Social Sciences, University of Tasmania)**

- ▶ We need a human rights-based framework for responding to sexual abuse
- ▶ Organisations are making policy on the run (or denying or ignoring sexual abuse)
- ▶ There is a level of discomfort among nurses and geriatricians in talking about sexual abuse
- ▶ The reporting pathways for them and many other relevant practitioners are unclear.
- ▶ It is not clear that reporting abuse to the elder abuse hotline results in action or change
- ▶ We often assume cognitive impairment is global but often it is patchy. People with cognitive impairment can often give reliable evidence of sexual abuse.

**Police need to be called at the earliest opportunity**

**We need a human rights-based framework for responding to sexual abuse**

<sup>3</sup> NARI has since released a draft Australian elder abuse screening tool. (30)

Dr Catherine Barrett (Director of OPAL Institute)

- ▶ The National Plan to Respond to the Abuse of Older Australians does not include any specific initiatives to prevent and respond to sexual abuse
- ▶ We need to take frameworks for preventing elder abuse and family violence and make sure sexual abuse/assault is included
- ▶ There has been an increasing interest in this issue recently, and there are 30 people in this room who are listening and want to do something
- ▶ There is a human aspect to responding to sexual abuse, which is just about listening and kindness
- ▶ Service providers need to be resourced, so they are able to give older women permission to speak about sexual abuse (or identify signs) and respond appropriately

**We need to grab hold of what's happening around elder abuse and make sure sexual abuse is included too**



## FAMILY PERSPECTIVES

### John (Family Member)

John gave Catherine an email to read to the workshop about his mother, who was 98 when she was sexually assaulted:

My mother was living in a nursing home as a low care resident. A couple of weeks prior to hospitalization she became vague then delirious. A staff member put her on the toilet and noticed she was bleeding and had multiple bruises -including on her genitalia. The police were called, and she was taken to hospital. She remained delirious and died a week later. An autopsy was conducted a week after she died. She had 22 (twenty-two) significant bruises to her body as well as bruising inside her vagina and on her cervix. Her inner thighs were extensively bruised. There was no semen in her vagina – and the autopsy report said they could not conclude that she had been raped.

Something happened to my mother. The police were called, and I thought there was an investigation. But I didn't hear back from the police and the nursing home wouldn't tell me anything because they said it was a police matter. I was not told about the Aged Care Complaints Scheme and do not know if they were contacted. I was not told about Elder Abuse or Sexual Assault services that could have provided support. It was as though it never happened. People just focused on their own roles – there was no one there to help us. If my mother was a 26-year-old woman who was found in the street delirious and covered in bruises, including bruises to her genitalia .... And she died a week later ... there would be an absolute uproar. This is ageism. My mother was not valued or respected as a human being

### What do we need to do?

- We need to make sure that older women in residential aged care are free from sexual abuse and have better security.
- We need education for service providers to make sure that older women who are suspected to have been sexually abused are treated as human beings
- We need an interdisciplinary approach to reports of sexual abuse – it's not okay to keep passing the buck between services
- Older women and their families must be given information about services that they can access

### Sally Conning (LGBTI Elder)

- ▶ Acknowledged that today is Transgender Day of Remembrance, a day to remember violence against trans and gender diverse people
- ▶ Older trans and gender diverse people also experience sexual abuse by partners and service providers
- ▶ But we have a complex relationship with the police and many people are afraid of them. This goes back to traumatic experiences of LGBTI-phobic abuse by police, such as the 78ers and the Tasty Nightclub raid.
- ▶ Trans women may not know that CASAs will include them.
- ▶ We need make sure that:
  - services are inclusive
  - language is inclusive
  - regional, rural and remote people can also access services.

**Older trans and gender diverse people experience sexual abuse too**

## REFLECTIONS FROM WORKSHOP PARTICIPANTS

In this session of the workshop, participants broke into groups to consider strategies for change related to the following key areas:

- ▶ Sexual abuse in aged care: what does the Royal Commission into Aged Care Quality and Safety need to consider?
- ▶ Sexual abuse in the home: what does the National Plan to Respond to the Abuse of Older Australians need to consider?

Each table was given butcher's paper and pens an information sheet that contained the terms of reference for the Royal Commission and some possible strategies for change (to help kickstart conversations). The reflections from workshop participants have been collated below:

### Sexual abuse in aged care: what does the Royal Commission into Aged Care Quality and Safety need to consider?

#### Factors that make older women vulnerable

- ▶ Ageism – myth that old age is a protective factor against sexual assault
- ▶ Sexism – belief that older women are not attractive and don't experience sexual assault; lack of action
- ▶ Diminished cognitive capacity (particularly dementia)
- ▶ Power imbalance between residents and service providers
- ▶ Being Aboriginal and Torres Strait Islander or Culturally and Linguistically Diverse (e.g. language barriers and cultural attitudes to discussing sexual issues)
- ▶ Sexual orientation and gender diversity (LGBTI)
- ▶ Past trauma (e.g. prior family violence or sexual abuse)
- ▶ Isolation (infrequent or no contact with people from outside the facility)
- ▶ Lack of access to the internet (in some aged care homes).

## Listening to older women

- ▶ Understand that older women often do not feel 'heard'
- ▶ Build rapport with older women
- ▶ Take notes
- ▶ Active listening
- ▶ Take all allegations seriously
- ▶ Acknowledge implicit memory and emotional memory
- ▶ Address language barriers (use interpreters)
- ▶ Understand that many people will not talk about sexual abuse until they are 'asked'
- ▶ Recognise that older people may use different words around sexual abuse (e.g. euphemisms). Need to use behavioural questions.
- ▶ Start by believing (do not assume people with dementia are hallucinating)
- ▶ Be aware of your own cognitive dissonance (i.e. we do not want to believe that sexual abuse of older women is happening ... but this is not the same as 'it doesn't happen')
- ▶ Understand that a person with dementia can be a reliable witness if treated in the right way
- ▶ Recognise that shame can silence older women
- ▶ Acknowledge that all sexual abuse is serious
- ▶ Look for both physical evidence (e.g. bruising) and psychological evidence (e.g. changes in demeanour, resident who appears frightened)
- ▶ Provide cultural safety and support for vulnerable women (e.g. Aboriginal and Torres Strait Islander women will only talk about 'women's business' to another woman). CALD women and LGBTI women are also vulnerable.
- ▶ Use elder abuse screening tools that have been co-designed with older people
- ▶ Understand that some older people have experienced previous sexual abuse (e.g. child abuse or family violence)

- ▶ Remember this is not just a legal issue, there is a human aspect too – provide older women with support.

## Working with survivors

- ▶ Acknowledge that safety is a basic human right
- ▶ Tell older women that sexual abuse is not their fault
- ▶ Always focus on the safety of the survivor
- ▶ Understand the expectations of the survivors and their families (biological/chosen)
- ▶ Recognise that our lack of action and permission to speak about sexual abuse silences other older women experiencing sexual abuse
- ▶ Make sure that survivors know they are in the driver's seat. Choice and control must sit with older women.
- ▶ Address the culture of defensiveness by service providers
- ▶ Advise Police at the earliest possible time to enable evidence-gathering
- ▶ Understand the role of Police
- ▶ Consider intersectionality – but how do we make this a reality?
- ▶ Be clear about where older women can go for support and provide this information to older women and their families
- ▶ Give older women the phone numbers for services they can access – assist them to access services
- ▶ Learn how to manage/secure a crime scene
- ▶ Find out what services the older woman wants – make sure she understands her options
- ▶ Consider where the older woman wants to live afterwards – check she is safe and feels safe
- ▶ Reframe options (e.g. "have you thought about...")
- ▶ Don't be frightened to take on people in the system who are not listening
- ▶ Need to provide transparency to family members when their loved one has been sexually abused

- ▶ Providers need to take action after sexual abuse is disclosed
- ▶ Those actions need to 'have teeth' to hold the perpetrator to account and ensure the survivor is supported and safe

## Perpetrators

- ▶ There must be accountability for individual perpetrators
- ▶ Acknowledge that non-family members may sexually abuse older women (e.g. co-residents, aged care staff, visitors, health/allied health practitioners)
- ▶ Understand that older men may lose sexual inhibitions or become hypersexual with dementia
- ▶ Identify strategies to 'manage' cognitively impaired perpetrators
- ▶ Provide support on how to 'manage out' staff members who are perpetrators
- ▶ Ensure that men need to be a part of this conversation around responding to perpetrators.

## Education

- ▶ Orientation for new residents and new staff in aged care facilities needs to include information on the sexual rights of residents
- ▶ Ensure staff know about internal policies for addressing sexual abuse
- ▶ Provide specific training on strategies for working with survivors and perpetrators who have cognitive impairment
- ▶ Provide residents with information about their rights, including their sexual rights
- ▶ Information needs to be culturally relevant (e.g. for CALD residents and staff)
- ▶ Provide education and policy for staff on sexuality and sexual rights – including strategies to promote sexual safety
- ▶ Dispel the mythology around sexual abuse which makes it largely invisible (e.g. it is not rare; but it is rarely reported – we need to look at why)
- ▶ Produce pamphlets specifically for older women

who have been sexually abused

- ▶ Need to increase general community awareness about sexual abuse of older women
- ▶ Providers need training to gain the skills and strategies to be confident enough to ask, listen to and support older women experiencing sexual abuse
- ▶ Hold an interdisciplinary gathering focussed on sexual abuse of older women – to clarify best practice and inform policy and education
- ▶ Analyse data on 'unlawful sexual contact' to identify patterns and to inform the development of policies to guide staff and mandatory education modules
- ▶ Undertake marketing to tell people that sexual violence services help older people too
- ▶ Provide training across sectors (e.g. aged care and sexual assault services, family violence), especially for front-line workers
- ▶ Provide training for aged care staff about sexual abuse, including:
  - Risk factors
  - Memory (implicit)
  - Believing older women
  - Behavioural strategies for co residents who perpetrate sexual abuse
  - Their responsibilities.

## Reporting

- ▶ Need a clear definition of sexual abuse/assault (recognising which behaviours do (or don't) constitute sexual abuse and broader than 'sexual contact' (abuse may not include physical contact)
- ▶ Need to understand what constitutes consensual sex (particularly when there are issues of cognitive impairment)
- ▶ Scope of problem needs to be clarified – currently underreported
- ▶ Need clear and consistent reporting policies (currently people are confused about when or where to report)

- ▶ Understand that older women may delay reporting sexual abuse and that this is common
- ▶ Compulsory reporting of resident-to-resident sexual abuse so we can understand, monitor and respond to this problem
- ▶ Give survivors who have cognitive capacity the right to choose whether or not to report. But their choice not to report should not prevent action against the alleged perpetrator.
- ▶ Consider how to improve the rates of reporting (the ABS say only 1 in 10 report) – need to understand the scope of the problem to ensure appropriate actions
- ▶ Understand that trans and gender diverse people will be reluctant to report to Police.
- ▶ Will need careful strategies for the prevalence study to encourage older women to disclose.
- ▶ We need access to Department of Health and Police data to identify patterns and information strategies for prevention.

#### Building on existing policy

- ▶ We need national leadership from politicians around preventing sexual abuse of older women
- ▶ Use the Royal Commission as an opportunity to advocate for better policy around preventing the sexual abuse of older women
- ▶ Formalise sexual safety as a basic human right in a National Charter of Rights (e.g. like the one South Australia has)
- ▶ Consider intersection with family violence policies
- ▶ Consider the role of visitors to facilities in preventing and responding to sexual abuse
- ▶ We need an integrated and 'joined up' policy framework, not fragmented responses or passing the buck from one service to another – there should be no wrong door
- ▶ No more policy 'on the run' – this issue deserves careful consideration

- ▶ Consider screening of residents (e.g. people with prior criminal history of sexual or violent offences). However, then the problem is where can those people go? Or how can they best be managed?
- ▶ Provide special witness procedures and court supports to older women giving evidence about sexual abuse (similar to child witnesses)
- ▶ National policy and legislation to create consistency around elder abuse
- ▶ Have a dedicated worker for older people in each Centre Against Sexual Assault (similar to the ones they have for people living with a disability)
- ▶ Gathering data needs to evolve into policy, education and capacity building to prevent sexual abuse
- ▶ Services need to be inclusive for trans and gender diverse people
- ▶ Need to focus on both prevention and intervention
- ▶ Need to build momentum around the issue of sexual abuse of older women – the community want action but the responses of aged care services, advocacy and complaint services not meeting community expectations and families speaking with media because they do not feel heard or that service responses are adequate
- ▶ Need to ensure older women have access to family violence and sexual assault services
- ▶ Need cross-sector collaboration to enable easy access to a suite of supports e.g.: aged care, sexual assault services, complaint and advocacy services, family violence services
- ▶ Need a multidisciplinary centre where services work together to support survivors
- ▶ Need better funding for sexual abuse services to be pro-active in reaching out to older women.

#### Practice improvements

- ▶ Better investigation of what service providers are currently doing, to inform development of change strategies
- ▶ More accountability for residential aged care providers who do not respond appropriately to allegations of sexual abuse
- ▶ Start by educating the Board and Senior Managers about sexual abuse
- ▶ Require providers to have an internal policy on sexual abuse that covers staff, residents, visitors and families
- ▶ Workforce development, including:
  - Orientation for new staff
  - Mandatory training for staff
  - Giving staff more agency
  - Quality of staff
  - Qualifications of staff (e.g. Registered Nurses)
  - Staffing levels
  - Funding / resources.
- ▶ Consider the culture within the aged care home and how that is created/changed – what messages do staff receive that sexual abuse will not be tolerated?
- ▶ Consider cultural diversity of staff and residents
- ▶ Facilitate attendance by General Practitioners at residential aged care homes in response to reports of sexual abuse
- ▶ We need to present the case to the Government that the cost of doing nothing here far outweighs the cost of resourcing prevention of sexual abuse
- ▶ Provide cultural safety for vulnerable groups (e.g. transgender and non-binary older people)
- ▶ Be aware that denial of rights to sexual rights is also a form of abuse.

#### Sexual abuse in the home: what does the National Plan to Respond to the Abuse of Older Australians need to consider?

- ▶ Sexual abuse of older women happens in the home too.
- ▶ The families of older women may be more comfortable discussing sexual abuse in aged care than in the home. There is considerable shame attached to sexual abuse by a family member
- ▶ Media reports have focused on sexual abuse in residential aged care – but our knowledge of family violence tells us that older women will be experiencing sexual abuse by family members
- ▶ Sexual abuse can be perpetrated by husbands/intimate partners or relatives (e.g. sons, sons-in-law or grandsons), as well as by people outside the family.
- ▶ Sexual abuse of older women in their own home is also perpetrated by service providers – we need to address this issue, including provision of information on sexual abuse and sexual boundaries for all home care workers
- ▶ We are much more comfortable discussing sexual abuse by outsiders than by family members.
- ▶ We need to raise awareness among older people about the sexual rights of individuals in intimate relationships (e.g. pamphlets in doctor's waiting rooms). Many older women grew up with marital rape immunity laws – meaning husbands did not have to negotiate consent for sex with their wives.<sup>4</sup>
- ▶ Be aware that some cultures and religions may still discourage older women from reporting sexual abuse by an intimate partner.
- ▶ We need to raise awareness among families about sexual abuse of older women. Sometimes the family does not believe it is happening and actively try to stop the older woman from reporting.

<sup>4</sup> Marital rape was partially criminalised in South Australia in 1976, with full criminalisation starting in New South Wales and Victoria in 1981. Queensland was the last state to criminalise marital rape in 1989, with the Northern Territory following in 1994.(41)

## Executive summary

This paper considers better ways to prevent and respond to the sexual abuse of older women at home and in residential aged care by:

- Providing background information about the definitions of sexual abuse (and other related terms) and estimates of the prevalence of sexual abuse (in Australia and worldwide).
- Reviewing the policy context in Australia, including:
  - the policy framework pre-March 2019
  - the various policy reviews conducted since 2011
  - recent policy developments post-March 2019.
- Reviewing the research context in Australia, including:
  - plans for a prevalence study
  - need for literature reviews
  - plans for an agreed set of national research priorities.
- Reporting on the outcomes of the AAG Workshop held in November 2018, including:
  - presentations
  - reflections from workshop participants
  - evaluation of the workshop.
- Providing a list of policy recommendations to assist governments to implement the *National Plan to Respond to the Abuse of Older Australians* and to assist the *Royal Commission into Aged Care Quality and Safety*.

***“Safety is a basic human right”***

Di MacLeod  
Director,

Gold Coast Centre Against Sexual Violence

## Policy recommendations

The list of policy recommendations has been developed based on the information summarised in this paper. It is intended to assist:

- the Royal Commission into Aged Care Quality and Safety with its inquiry; and
- Commonwealth, state and territory governments with the implementation plan for the National Plan to Respond to the Abuse of Older Australians

### Charter of rights

1. Australia should have a *National Charter of Rights for Older People* that specifically includes the right to protection from all forms of sexual abuse.

### Royal Commission

2. The *Royal Commission into Aged Care Quality and Safety* should include a specific focus on sexual abuse of older people in both residential aged care and at home.

### National Plan

3. Future iterations of the *National Plan to Respond to the Abuse of Older Australians* should include specific initiatives to prevent and respond to sexual abuse of older people.
4. In the meantime, the Council of Attorneys-General should request that the states and territories include specific initiatives, to prevent and respond to sexual abuse of older people, in the implementation plan for the *National Plan to Respond to the Abuse of Older Australians*. Some suggested initiatives are set out the recommendations below.

### Collaboration

5. Policy makers, researchers and providers must work together with older people to develop, implement and evaluate initiatives to prevent and respond to the sexual abuse of older people.
6. Federal, state and territory governments must work together to develop, implement and evaluate initiatives to prevent and respond to the sexual abuse of older people.

## Resources

7. Federal, state and territory governments must provide appropriate resources to develop, implement and evaluate initiatives to prevent and respond to the sexual abuse of older people.

## Definition

8. The Australian Government should conduct stakeholder consultation (including with older people) and develop guidelines to clarify the definition of sexual abuse in the *National Plan to Respond to the Abuse of Older Australians*. The guidelines should specifically address issues around consent and intent for older people with cognitive impairment.

## Prevalence study

9. The national prevalence study on elder abuse (proposed in the *National Plan to Respond to the Abuse of Older Australians*) should include data about sexual abuse of older people. We note the Attorney-General has already said this will occur. (28) The sexual abuse prevalence data should be separate from general elder abuse prevalence data and should include sexual abuse in both institutional and community settings.

### *“We need a joined-up response for victims”*

Dominique Horne  
Elder Abuse Consultant,  
Better Place Australia

## Research

10. The Australian Government should commission appropriate literature reviews on sexual abuse of older people in both institutional and community settings (e.g. scoping review and/or systematic review) to assist in identifying research gaps.
11. The agreed set of national research priorities (proposed in the *National Plan to Respond to the Abuse of Older Australians*) should include research about sexual abuse of older people in both institutional and community settings as a priority. Research about sexual abuse of older people should include primary research, research translation and evaluation studies.



12. Governments should provide quarantined funding for research about sexual abuse of older people in both institutional and community settings.

## Knowledge hub

13. The knowledge hub to consolidate information and resources about abuse (proposed in the *National Plan to Respond to the Abuse of Older Australians*) should specifically include information and resources about sexual abuse of older people.

## Awareness raising / community education

14. The communications strategy to increase understanding and raise awareness of abuse (proposed in the *National Plan to Respond to the Abuse of Older Australians*) should specifically include sexual abuse.
15. The Australian Government should fund appropriate projects to develop, implement and evaluate awareness raising /community education about:
  - older people’s rights
  - what constitutes elder abuse (including sexual abuse) and how to recognise it
  - dispelling myths about sexual abuse of older people
  - identifying which older people are vulnerable to sexual abuse (risk factors for and drivers of abuse)
  - sexual abuse of older people in both institutional and community settings



- knowledge and tools to equip families and service providers to prevent and respond to sexual abuse of older people
- where older people experiencing sexual abuse can go to seek support.

### Support services for older people and their families

16. The plan to establish and evaluate front-line support services for people experiencing abuse (proposed in the *National Plan to Respond to the Abuse of Older Australians*) should specifically include services for preventing and responding to sexual abuse of older people.
17. Support services must be required to provide culturally safe and inclusive services for vulnerable older people who are at risk of or experiencing sexual abuse, including (but not limited to):
  - People with cognitive impairment
  - Aboriginal and Torres Strait Islander peoples
  - Culturally and linguistically diverse people
  - Lesbian, gay, bisexual, transgender and intersex people
  - People who are homeless or at risk of homelessness
  - People living in regional, rural and remote areas.

### *“We need to make people care enough to act”*

Professor Joseph Ibrahim  
Health Law and Ageing Research Unit  
Monash University

18. Support services must work collaboratively across sectors to provide a ‘joined-up’ response to older people who are at risk of or experiencing sexual abuse. This may include (but is not limited to) the following sectors:
  - Residential aged care and home care
  - Elder Abuse and Advocacy Services
  - Family Violence Services
  - Centres Against Sexual Assault
  - Police
  - Legal assistance services
  - Health and allied health services
  - Guardianship and administration
  - Public and community housing.
19. State and Territory governments should fund a dedicated worker to support older people experiencing sexual abuse in each Centre Against Sexual Assault.



20. Support services should also be provided for the families (including families of choice) of older people who are at risk of or experiencing sexual abuse.

### Share learnings

21. The plan to improve our ability to share learnings from existing programs (proposed in the *National Plan to Respond to the Abuse of Older Australians*) should specifically include sharing learnings about preventing and responding to the sexual abuse of older people. This could include:
- Cross-sector collaborative networks
  - Multidisciplinary seminars and conferences
  - Multidisciplinary service hubs.

### Incident reporting and monitoring

22. The Australian Government should consider the recommendations in the KPMG report *Strengthening protections for older Australians - Development of models and options for a Serious Incident Response Scheme* and implement an appropriate serious incident reporting scheme in Australia that will provide better ways to prevent and respond to the sexual abuse of older people. The scheme must include reporting of incidents where the alleged perpetrator has a cognitive impairment.



23. The Department of Health should undertake further analysis and provide more information on reportable incidents of unlawful sexual contact for inclusion in the annual *Report on the Operation of the Aged Care Act*, to inform policy and practice improvements. For example, information about:

- Unlawful sexual contact rate as a proportion of people in care
- Demographic data about victims and perpetrators
- What response was taken by the provider, Police, etc.
- Trends
- How the data could be used to provide better ways to prevent and respond to sexual abuse of older people.

24. The Aged Care Quality and Safety Commission should monitor and assess aged care providers in relation to the way they prevent and respond to the sexual abuse of older people in their care.

### Workforce screening

25. The Australian Government should conduct stakeholder consultation (including with older people) and develop options for better workforce screening (including paid employees and volunteers) in residential aged care and home care. The revised workforce screening requirements should be formalised in the *Accountability Principles 2014*.

26. The Australian Government should also consider screening residents in residential aged care and developing resources to build the capacity of providers to appropriately respond to residents who have a prior history of committing sexual abuse.

### Workforce training

27. The Australian Government should fund appropriate projects to develop, implement and evaluate education for workers across relevant sectors about preventing and responding to sexual abuse of older people. This training should also address intimacy, sexuality and sexual rights more broadly.

Pictured: Dominique Home  
Elder Abuse Consultant, Better Place Australia

## Elder abuse screening tool

28. The Australian Government should fund appropriate projects to develop, implement and evaluate an elder abuse screening tool that specifically includes sexual abuse of older people in both institutional and community settings. The tool must include strategies for screening people with cognitive impairment.

## Legal procedures

29. State and territory governments should conduct stakeholder consultation (including with older people) and develop options for better legal procedures for older people giving evidence about sexual abuse. These legal procedures should be nationally consistent.

*“We need to grab hold of what’s happening around elder abuse and make sure sexual abuse is included too”*

Dr Catherine Barrett  
Director, OPAL Institute

## Perpetrators

30. The Australian Government should conduct stakeholder consultation (including with older people) and develop options for better ways to respond to perpetrators of sexual abuse against older people, including:
- Providing appropriate accountability for individual perpetrators
  - How to manage perpetrators with cognitive impairment
  - How to manage staff who perpetrate sexual abuse
  - Providing appropriate rehabilitation services for perpetrators.

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# REFERENCES

1. Department of Health. Aged care research and reporting [Internet]. Available from: <https://beta.health.gov.au/health-topics/aged-care/aged-care-research-and-reporting>
2. Yon Y, Ramiro-Gonzalez M, Mikton C, Huber M, Sethi D. The prevalence of elder abuse in institutional settings: a systematic review and meta-analysis. *Eur J Public Health*. 2019 Feb;29(1):58–67.
3. World Report on Violence and Health [Internet]. World Health Organisation; 2002. Available from: [https://www.who.int/violence\\_injury\\_prevention/violence/world\\_report/chapters/en/](https://www.who.int/violence_injury_prevention/violence/world_report/chapters/en/)
4. National Plan to Respond to the Abuse of Older Australians [Internet]. Council of Attorneys-General; 2019. Available from: <https://www.ag.gov.au/RightsAndProtections/protecting-the-rights-of-older-australians/Documents/National-plan-to-respond-to-the-abuse-of-older-australians-elder.pdf>
5. Cain R, Wyatt R. Older, Better, Together: The primary prevention of elder abuse by prevention networks [Internet]. Seniors Rights Victoria; 2019. Available from: not yet available online
6. Meagher T. The Danger of the Monster Myth. ABC News Online [Internet]. 2014 Apr 22; Available from: <https://www.abc.net.au/news/2014-04-18/meagher-the-danger-of-the-monster-myth/5399108>
7. Aged Care Act 1997 [Internet]. Australian Government; 1997. Available from: <https://www.legislation.gov.au/Details/C2019C00164>
8. Department of Health. Guide for reporting reportable assaults [Internet]. Ageing and Aged Care. 2019. Available from: <https://agedcare.health.gov.au/ensuring-quality/aged-care-quality-and-compliance/guide-for-reporting-reportable-assaults>
9. AHPRA Mandatory Reporting [Internet]. Australian Health Practitioner Regulation Agency. Available from: <https://www.ahpra.gov.au/Notifications/Raise-a-concern/Mandatory-notifications.aspx>
10. Crimes against older people in Victoria [Internet]. Crimes Statistics Agency; 2018. Available from: <https://www.crimestatistics.vic.gov.au/research-and-evaluation/publications/victims/crimes-against-older-people-in-victoria>
11. Hill T, Katz I. Insights into abuse of older people-analysis of ABS datasets [Internet]. UNSW Social Policy Research Centre; 2019. Available from: <https://www.sprc.unsw.edu.au/research/projects/insights-into-abuse-of-older-people-analysis-of-ABS-datasets/>
12. Ibrahim J. Transcript of proceedings: Royal Commission into Aged Care Quality and Safety [Internet]. Auscript Australasia; 2019. Available from: <https://agedcare.royalcommission.gov.au/hearings/Documents/transcripts-2019/transcript-16-may-2019.pdf>
13. Yon Y, Mikton C, Gassoumis Z, Wilber K. Elder abuse prevalence in community settings: a systematic review and meta-analysis. *Lancet Glob Health*. 2017 Feb;5:e147-156.
14. The Power Project: About Compulsory Reporting [Internet]. OPAL Institute. Available from: <https://www.opalinstitute.org/compulsory-reporting.html>
15. Mann R, Horsley P, Barrett C, Tinney J. Norma's Project: A Research Study into the Sexual Assault of Older Women in Australia [Internet]. Australian Research Centre in Sex, Health and Society; 2014. Available from: <https://www.opalinstitute.org/uploads/1/5/3/9/15399992/researchreport.pdf>
16. Police Certificate Guidelines [Internet]. Department of Health; 2017. Available from: [https://agedcare.health.gov.au/sites/default/files/documents/04\\_2017/police\\_certificate\\_guidelines\\_april\\_2017.pdf](https://agedcare.health.gov.au/sites/default/files/documents/04_2017/police_certificate_guidelines_april_2017.pdf)
17. Accountability Principles 2014 [Internet]. 2014. Available from: <https://www.legislation.gov.au/Details/F2019C00059>
18. Dean A. Elder Abuse: Key Issues and Emerging Evidence. CFCA Paper No. 51 [Internet]. Australian Institute of Family Studies; 2019. Available from: <https://aifs.gov.au/cfca/publications/cfca-paper/elder-abuse>
19. Everybody's Business: Stocktake of elder abuse awareness, prevention and response activities in Australia [Internet]. Australian Government; 2019. Available from: <https://www.ag.gov.au/RightsAndProtections/protecting-the-rights-of-older-australians/Documents/Stocktake-of-elder-abuse-awareness-prevention-and-response-activities.pdf>
20. Caring for Older Australians Inquiry Report [Internet]. Productivity Commission; 2011. Available from: <https://www.pc.gov.au/inquiries/completed/aged-care/report/aged-care-volume2.pdf>
21. Barrett C. Submission to the ALRC Inquiry on Protecting the Rights of Older Australians from Abuse [Internet]. 2016. Available from: <https://www.opalinstitute.org/uploads/1/5/3/9/15399992/sexualabusebarrett.pdf>
22. Elder Abuse - A National Legal Response: Final Report [Internet]. Australian Law Reform Commission; 2017. Report No.: 131. Available from: [https://www.alrc.gov.au/sites/default/files/pdfs/publications/elder\\_abuse\\_131\\_final\\_report\\_31\\_may\\_2017.pdf](https://www.alrc.gov.au/sites/default/files/pdfs/publications/elder_abuse_131_final_report_31_may_2017.pdf)
23. Carnell K, Paterson R. Review of National Aged Care Quality Regulatory Processes Report (the Carnell-Paterson Review) [Internet]. 2017. Available from: <https://beta.health.gov.au/sites/default/files/review-of-national-aged-care-quality-regulatory-processes-report.pdf>
24. Royal Commission into Aged Care Quality and Safety [Internet]. 2018. Available from: <https://agedcare.royalcommission.gov.au/Pages/default.aspx>
25. KPMG. Strengthening protections for older Australians – Options for a national aged care Serious Incident Response Scheme report [Internet]. Department of Health; 2019. Available from: <https://agedcare.health.gov.au/quality/strengthening-protections-for-older-australians-options-for-a-national-aged-care-serious-incident-response-scheme-report>
26. Charter of Aged Care Rights [Internet]. Department of Health; 2019. Available from: <https://agedcare.health.gov.au/quality/single-charter-of-aged-care-rights>
27. Aged Care Quality Standards [Internet]. Department of Health; 2019. Available from: <https://agedcare.health.gov.au/quality/aged-care-quality-standards>
28. Wass K. Letter about prevalence study addressed to Dr Catherine Barrett. Attorney-General's Department, Elder Abuse Team; 2018.
29. Barrett C. The Power Project [Internet]. OPAL Institute. Available from: <https://www.opalinstitute.org/power-project.html>
30. Draft Australian Elder Abuse Screening Tool [Internet]. National Ageing Research Institute; 2019. Available from: [https://www.nari.net.au/files/files/documents/nari\\_mv080\\_australian\\_elder\\_abuse\\_screening\\_instrument\\_ausi\\_-\\_a4\\_2pp\\_-\\_update\\_v1\\_0.pdf](https://www.nari.net.au/files/files/documents/nari_mv080_australian_elder_abuse_screening_instrument_ausi_-_a4_2pp_-_update_v1_0.pdf)
31. AAG Pre-Conference Workshop - Unlawful Sexual Contact: Compliance Resourcing and Prevention [Internet]. Australian Association of Gerontology; 2019. Available from: <https://www.aag.asn.au/documents/item/2849>
32. Smith D, Cunningham N, Willoughby M, Young C, Odell M, Ibrahim J, et al. The epidemiology of sexual assault of older female nursing home residents in Victoria between 2000 and 2015. *Leg Med*. 2019;36:89–95.
33. Reports and Resources [Internet]. OPAL Institute. Available from: <https://www.opalinstitute.org/reports--resources.html>
34. Brijnath B, Gahan L, Gaffy E, Dow B. Build Rapport, Otherwise No Screening Tools in the World Are Going to Help": Frontline Service Providers' Views on Current Screening Tools for Elder Abuse. *Gerontol Epub* [Internet]. 2018 Dec 20; Available from: [https://academic.oup.com/gerontologist/search-results?page=1&q=Build%20Rapport%2C%20Otherwise%20No%20Screening%20Tools%20in%20the%20World%20Are%20Going%20to%20Help%E2%80%9D%3A%20Frontline%20Service%20Providers%E2%80%99%20Views%20on%20Current%20Screening%20Tools%20for%20Elder%20Abuse&fl\\_SiteID=5284&SearchSourceType=1&allJournals=1](https://academic.oup.com/gerontologist/search-results?page=1&q=Build%20Rapport%2C%20Otherwise%20No%20Screening%20Tools%20in%20the%20World%20Are%20Going%20to%20Help%E2%80%9D%3A%20Frontline%20Service%20Providers%E2%80%99%20Views%20on%20Current%20Screening%20Tools%20for%20Elder%20Abuse&fl_SiteID=5284&SearchSourceType=1&allJournals=1)

35. Barrett C, MacLeod D. AAG Webinar: Preventing sexual abuse of older women. The role of service providers [Internet]. AAG. 2018. Available from: <https://www.aag.asn.au/news-publications/past-webinar-recordings/past-webinar-recordings>
36. Challenging misconceptions about sexual offending: Creating an evidence-based resource for police and legal practitioners [Internet]. Australian Institute of Family Studies and Victoria Police; 2017. Available from: <https://aifs.gov.au/publications/challenging-misconceptions-about-sexual-offending-creating-evidence-based-re>
37. 2017 RM Gibson Research Grant Recipients [Internet]. AAG. 2017. Available from: <https://www.aag.asn.au/education/2017-rm-gibson-research-fund-recipients>
38. Barrett C. It's gone wild out there: Women's stories about sexuality and ageing [Internet]. 2015. Available from: <https://www.opalinstitute.org/uploads/1/5/3/9/15399992/wildoutthere.pdf>
39. Stop Sexual Violence: It's Never Too Late [Internet]. Gold Coast Sexual Assault Support Service; 2002. Available from: <http://www.stopsexualviolence.com/files/pdf/Its-never-too-late.pdf>
40. Smith D, Bugeja L, Cunningham N, Ibrahim J. A systematic review of sexual assaults in nursing homes. *The Gerontologist*. 2017;gnx022–gnx022.
41. Featherstone L. Rape in marriage: Why was it so hard to criminalise sexual violence? [Internet]. Australian Women's History Network. 2016. Available from: <http://www.auswhn.org.au/blog/marital-rape/>

## APPENDIX 1



**ADVANCING NOT RETIRING:  
ACTIVE PLAYERS,  
A FAIR FUTURE**

# A FAIR FUTURE FOR OLDER WOMEN WHO EXPERIENCE SEXUAL ABUSE

**WORKSHOP HOSTED BY**  
OPAL Institute

**PRESENTERS INCLUDE**

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*Director OPAL Institute*

Di MacLeod *Director Gold Coast Against Sexual Violence Inc*

Jill Bolen *AAG Elder Abuse SIG*

Carolyn Worth *Manager, South East Centre Against Sexual Assault*

Dominique Horne *FMC Mediation & Counselling*

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Luke Gahan *Research Fellow, National Ageing Research Institute*



Despite research showing one in four Australian women has experienced physical or sexual violence by an intimate partner, there has been little focus on the experiences of older women. This can partly be attributed to the misconception that sexual abuse of older women is rare. It is more accurate to say older women rarely report sexual abuse – because we do not listen or give them permission to speak about their sexual abuse. This is a significant gap because those service providers who listen have transformed the health and wellbeing of older women experiencing sexual abuse.

This workshop begins by outlining evidence on the sexual abuse of older women. It will engage participants in exploring barriers to older women reporting sexual abuse and how these can be addressed. Next a series of short interdisciplinary presentations will outline a range of perspectives on preventing sexual abuse of older women. Then participants will hear from a 96 year old about the impacts of sexual abuse and how service providers transformed her life. The final part of the workshop engages participants in reviewing draft guide sheets for service providers and understanding their role in prevention.

📅	Tuesday, 20 November 2018
🕒	9:30am to 12:30pm
📍	Melbourne Convention Exhibition Centre 1 Convention Centre Pl, South Wharf
💰	\$55.00 (inc lunch & morning tea)

**51<sup>st</sup> AAG CONFERENCE**  
21 – 23 NOVEMBER 2018  
MELBOURNE, AUSTRALIA

THIS WORKSHOP IS FUNDED BY THE AUSTRALIAN GOVERNMENT THROUGH THE DEMENTIA AND AGED CARE SERVICES FUND



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**CONNECTING**  
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