





CANADIAN NETWORK for the PREVENTION of ELDER ABUSE

RÉSEAU CANADIEN pour la PRÉVENTION du MAUVAIS TRAITEMENT des AÎNÉS



The Wildflower Way:

Equity-Oriented Care for Women 55+ Who Experience Gender-Based Violence

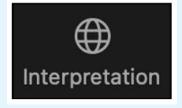


Webinaire présenté en anglais avec interprétation en français



Women and Gender Equality Canada Femmes et Égalité des genres Canada

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## Communication







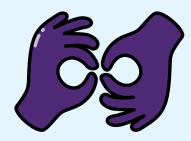


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**Q & A** - Type your questions in Question/ Answer Box and addressed after the presentation.

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# **Evaluation**



Your feedback on knowledge gain from the session and suggestions for future topics is appreciated.

Follow-up email with survey link

# Recording



A recorded version of this webinar will be available and posted on our website.

Links and documents shared during the webinar will also be posted.



# Respecting Privacy and Confidentiality



We appreciate there may be personal circumstances or issues which participants may wish to address. However, in keeping with our commitment to maintaining your privacy and confidentiality, today we will be answering general questions posed through the Q&A.



If someone wishes to discuss specific circumstances, we invite you to contact EAPO following this webinar to arrange for a confidential conversation so that we may further assist you.



Elder Abuse Prevention Ontario

# **TALK TO US**

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#### STOP ABUSE – RESTORE

SIMPLY PUT, WE ALL HAVE A ROLE TO PLAY

#### RESPECT



# **Vision**

EAPO envisions an Ontario where all seniors are **free** from **ageism** and **abuse**, where **human rights** are advanced, **protected** and **respected**.

EAPO is mandated to support the implementation of **Ontario's Strategy to Combat Elder Abuse.** 



Funded by the Ontario Government, under the Ministry for Seniors and Accessibility (MSAA)



Elder Abuse Prevention Ontario

WEBINAR

Mutual Mistreatment in the Context of Caregiving:

When Neurocognitive Disorders Spark Confusion

December 3, 2025

1 PM - 2 PM (ET) | 10 AM - 11 AM (PT)

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# Canadian Network For the Prevention of Elder Abuse

#### **MISSION**

The CNPEA works to improve awareness, supports, and capacity to develop a national coordinated approach to elder abuse and neglect. We promote the rights of seniors through knowledge mobilization, collaboration, policy reform and education.

#### VISION

All seniors in Canada have access to the services and supports necessary to lead a quality life in their communities and live without fear of violence or neglect.

@cnpea

www.cnpea.ca

# Margaret MacPherson,

# Wildflower Project Manager

Margaret is a Research Associate with the Centre for Research and Education on Violence against Women and Children (CREVAWC) at Western University in London Ontario.

Margaret designs and develops curriculum and related materials on a number of initiatives including the Make It Our Business, workplace domestic violence program and It's Not Right! Neighbours, Friends and Families for Older Adults.





Introducing

# The Wildflower Way

Equity-Oriented Care for Women 55+ who experience gender-based violence



# Project partners





















# **Future Us:** Roadmap to Elder Abuse Prevention

Future Us is a pan-Canadian engagement strategy that has been developed for people of all ages. The roadmap is for citizens, advocates, professionals and leaders in communities and governments to help us work from different parts of society on a shared project to prevent violence and abuse of older people in their homes and communities. Our future is up to us.

View the Roadmap

Download the Roadmap PDF

#### Future Us sets out three broad goals

1

Prioritize elder abuse prevention in every community

2

Support-develop elder abuse networks as critical infrastructure

3

Teach everyone to recognize – respond & refer

# The Wildflower 'WHY': The status quo is unacceptable:

- Violence against women has been declared an epidemic in many Canadian communities
  - 187 femicides in 2024: 32% were 50+ (when age is included)
- Systemic Ageism: older women have been invisible in research major studies exclude women 49+
- Services for older women who have experienced GBV are scarce or non-existent
- Older women not identified in NAP seniors are included

# The "political class" of women not just demographics

# **Experience Lifelong Discrimination:**

Wage gaps, unpaid caregiving, pension inequities

# Structural Inequality is a form of GBV:

• Patriarchal systems that devalue women's labour, autonomy and safety

# Why Name Women Explicitly?

Invisibility in policy and research perpetuates harm

# **Intersectionality Matters:**

 Gender-diverse individuals and women who are racialized, immigrant or refugee, living with disabilities, in poverty, or in rural/remote communities face compounded risks of GBV

# GBV is not an individual issue



Although women make up over half the population, they remain a subordinated class in a patriarchal society.

Gender-diverse older adults are erased in data, services, and public discourse. Their experiences of harm, resilience, and identity are distinct. They deserve safety, recognition, a research focus and support.

# Plant Wildflowers



from business-as-usual to care-as-resistance

## Narrative change intervention:

l am a cog in a wheel l am a working machine

### I am a human being

l am a victim of circumstances l have no power

# I make choices everyday to make the system work

lam alone and overwhelmed

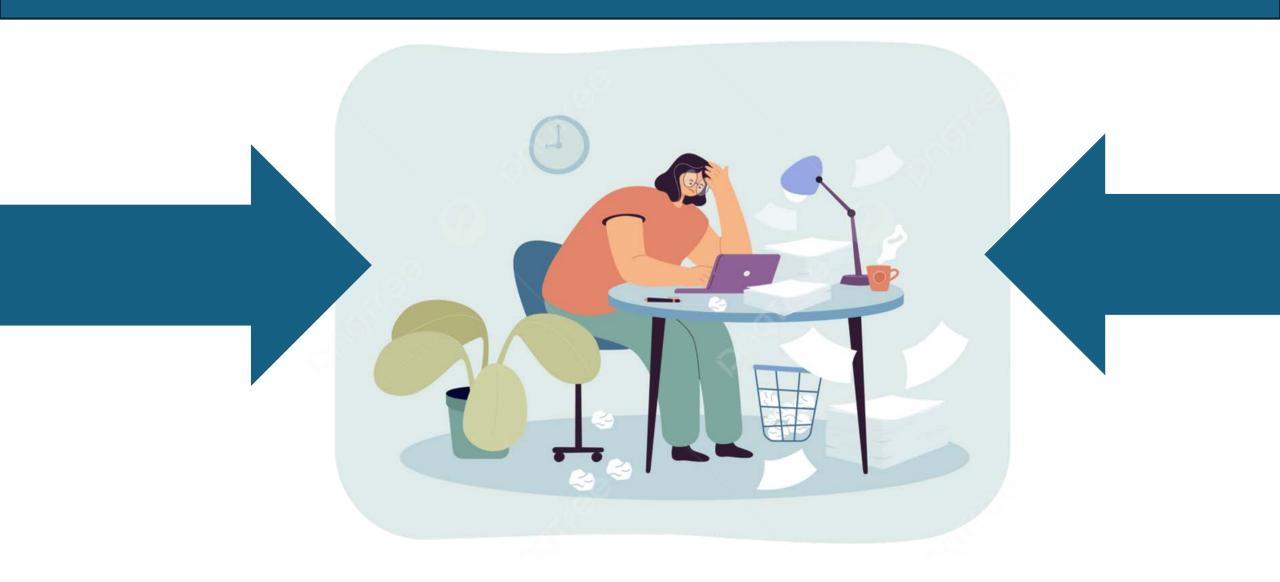
I am part of a movement

# Plant Wildflowers:

Growing care in the cracks of the system by looking for the life



# Implementation cannot be yet another version of 'do more with less'....



# New funding or services is unlikely

The goal is not simply to include older women in existing systems, but instead to imagine new ways of co-creating services, with approaches that intervene earlier, promote healing, and support both those seeking and providing services.



#### Women told us:

I told my story to the shelter staff.
They believed me. They never doubted me. They never asked, "really?" or "are you sure?" That made my whole time at the shelter really wonderful.

My counsellor practiced mirroring a lot. She helped me to see my happy, hopeful, enthusiastic self.

In my mind, I am part of a sisterhood. You're not alone.

If women are moving slower, it's not because they're old or dumb. It may be because they're being thoughtful and cautious.



At the heart of what women told us, there are common ideas:

listen, take time with me, show respect for my story and choices, be present, be kind.

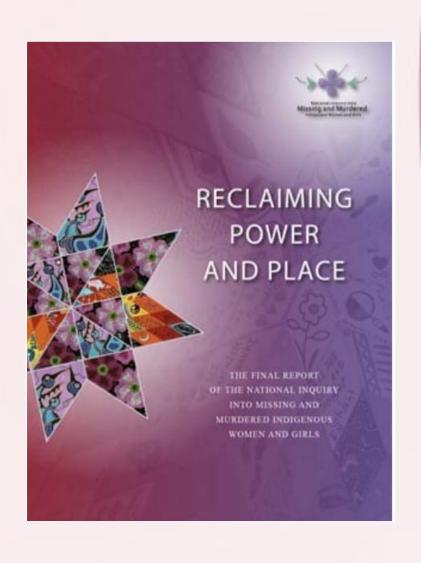
#### Professionals told us:

It's up to her. Success is about how she feels. Does she feel safer in the end? Is she able to manage her own life in a way that's acceptable to her? It isn't always about leaving the relationship.

We're going to listen to the woman, we're going to accompany her, because that's the feminist approach.

We don't tell the woman what she's going to do, and we support her in her decisions.

A positive experience means first and foremost that the woman feels listened to, at ease and confident.



Prioritize "relationship-forming moments, or encounters"...they provide an important window into understanding how Indigenous women, girls, and gender-diverse people are targeted for violence.

...relationships are key to both understanding the causes of violence and to making changes to end violence

we are each our own person, but we are also defined by our relationships to others

Pgs: 89 - 101

**ESTABLISH a NEW FRAMEWORK** 

# Equity Oriented Care: Trauma-and Violence-Informed Principles

Foster opportunities Create Cultural Safety Understand trauma Provide a strengthsfor choice, ...emotionally and and violence, and the based and capacitycollaboration, and physically safe impacts on individual building approach to connection environments lives and behaviours support individual coping and resilience GBV is not just an Address power Take the time Reflect back the individual issue imbalances Be present strength you see

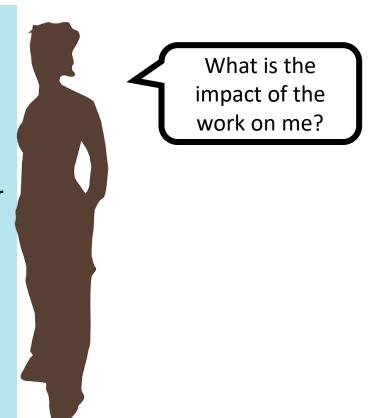


# TVI is both inward looking

#### Reflective

What is my experience?

- ✓ Do I recognize how I have been impacted by trauma and violence?
- ✓ Does my organization create safety for me to do my work?
- ✓ Do I have opportunities and choice to collaborate and connect?
- ✓ Am I valued for my experience and knowledge?



# TVI is both inward looking and outward facing

#### Reflective

What is my experien

What is the impact of my practice on others?

- ✓ Do I recognize how impacted by trauma and violence?
- ✓ Does my organization create safety for me to do my work?
- ✓ Do I have opportunities and choice to collaborate and connect?
- ✓ Am I valued for my experience and knowledge?

#### Reflective

What is my practice?

- ✓ Do I recognize the impacts of trauma and violence on behaviour and life situations of clients?
- ✓ Do I create safety by protecting individual choice biographies?
- ✓ Do I present an array of opportunities for choice, collaboration and connection?
- ✓ Can I support the person as the expert in their life

# Implicit Bias is inevitable

You can't be part of the solution if you are not part of the problem



#### 1 Physical Frailty

#### Bias:

"Older women are physically weak, tragile, or incapable of performing certain tasks."

#### Impact:

Can lead to unnecessary assistance, limiting independence, or exclusion from physical activities or opportunities that require physical effort.



#### 3 Diminished Professional Value

#### Bias

"Older women are less competent, adaptable, or productive in the workplace compared to their younger counterparts."

#### Impact:

Can result in being passed over for promotions, forced into early retirement, or excluded from professional development opportunities.



#### Invisibility in Media and Society

#### iias:

"Older women are not relevant or interesting."

#### Impact:

Can reinforce the notion that older women's contributions are less valuable. Lack of representation in media supports social solution and invisitality of older women in society.



#### Cultural Discomfort with Female Aging

#### Biasa

"Older women should be quiet and retiring, not asserting authority or taking up space."

#### Impact:

Can affirm the belief that women have no value once they move beyond roles defined by youth, appearance and service to others.



#### 2 Asexuality

#### Blas:

"Older women are not interested in or capable of having romantic or sexual relationships."

#### Impact

Can obscure older women's sexuality and issues of sexual violence, making it more difficult to talk about or to disclose.



#### 4. Caretaker Stereotypes

#### Bias:

"It is natural for women to be the caregiver and to put the needs of others first."

#### Impact:

Can lead to expectations of unlimited, unpaid care, sacrifice of self care, burn-out, financial instability, loss of personal autonomy.



#### 6 Cognitive Decline

#### Blas:

"Older women are less mentally sharp and more prone to memory loss simply because of their age."

#### Impact:

Can lead to patronizing behavior, such as not taking their opinions seriously or excluding them from decision-making processes.



#### B Perceived Lack of Technological Competence

#### Blass:

"Older women are not capable of using modern technology or are resistant to learning new technological skills."

#### Impact

Can lead to exclusion from digital communication or professional opportunities that require technological profidency.

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# TVI is both inward looking and outward facing



How supported are you in your practice and your well-being?

# Cultural Safety

Cultural safety is a concept that recognizes, respects, and nurtures the unique cultural identity of a person.

It is more than just the absence of racism or discrimination or being aware of other cultures.

It is about analyzing power imbalances, institutional discrimination, colonization.

Actively creating a workplace or a service that is welcoming and respectful of other cultures.

# Cultural Humility

Cultural humility involves an ongoing process of self-exploration and self-critique combined with a willingness to learn from others. It means entering a relationship with another person with the intention of honoring their beliefs, customs, and values.

It means acknowledging differences and accepting the person as they are.





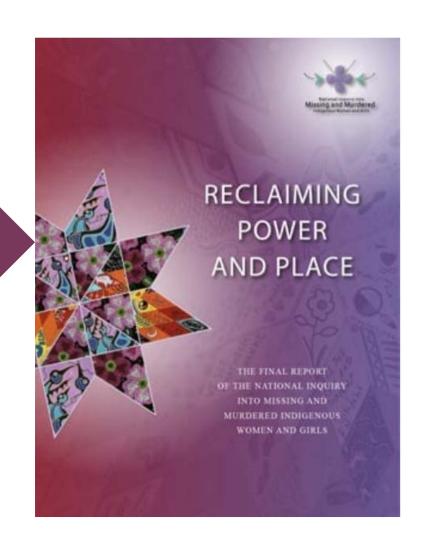
We are almost always aware of the ways that we don't have power Rarely when we do....

Julie Diamond: Power a User's Guide

Holocaust survivor Viktor Frankl: everything can be taken but one thing: the last of the human freedoms — to choose one's attitude in any given set of circumstances When I shift my use of power in a single encounter, I can:

- change the relational field,
- reduce institutional harm,
- increase cultural safety,
- contribute to systemic transformation

This is exactly what Reclaiming Power & Place asks of human service professionals: **relational accountability and transformation in every encounter** 



# The need for a complex systems model of evidence for public health (Rutter, 2017)

Instead of asking whether an intervention works to fix a problem, researchers should aim to identify *if and how it contributes to* reshaping a system in favourable ways.

Shifts within multiple elements across the many systems that influence the issue are required, some of which might only have small effects on individuals but can drive large changes when aggregated at population level.



# Reshape the System: this-person led care





You are the intervention.

Not the program, not the policy, not the checklist. Every time you listen deeply, respect a woman's pace, or challenge ageist assumptions, you are reshaping the system from within.

This is the Wildflower Way — care as resistance, care as transformation.

## What do I contribute?

- As a professional
- As a leader
- As a community member

YOU

What do I need to be able to make my contribution?

Your Organization

Community

Society

The Wildflower Way

The status quo in services for older women who are victim-survivors of gender-based violence is unacceptable

Read the Wildflower Guide



# The Wildflower Guide Equity-Oriented Care for Women 55+ Who Experience Gender-Based Violence

# The Wildflower Ecosystem

- 1. Prepare the Ground: To grow wildflowers in harsh environments
- 2. Plant the Seeds: Use the wildflower narrative intervention to guide planning
- 3. Tend the Shoots: Integrate equity-oriented care at practice and organizational levels
- 4. Nourish the Soil: Sustain through regular reflection and assessment

# Infographics

#### Substance use stigma Older women face stigma around substance use due to a combination of societal expectations, gender Underrepresentation in Research: norms, and age-related stereotypes. Older women face a unique form of ageism that abnormal or unexpected. combines both sexism and ageism. Substance use is seen as particularly inappropriate for older

Substance use, particularly alcohol or drugs, is seen as contradictory to traditional roles of women. leading to greater stigma when older women

engage in such behaviors Older women grew up in a time when there was less acceptance of substance use. Older women may judge themselves harshly for their substance

The lack of research perpetuates the stigma, as substance use by older women is often seen as

Women are often judged more harshly for behaviors perceived as "unfeminine" or inappropriate. Older women are expected to be responsible, refined and restrained.

Older women may be less likely to seek help. fearing that they will be judged or that their substance use will be seen as a moral failing rather than a health issue.



Dignity is the key to substance use stigma

See the whole person

- Listen without judgement centre autonomy, validate her experiences Advocate for age-responsive harm
- Foster intergenerational solidarity education to help shift narratives t blame to compassion.

## Supplemental Content: **Infographics**

This section expands on concepts introduced in the guide with infographics that can support dialogue in your organization.



#### 1. Equity Oriented Care:

EOC is an evidenced-based, best practice model of care and a philosophy was developed by and for the Canadian healthcare sector. EOC is applic for any human service. Studies have shown that EOC addresses the sy inequities and social determinants that impact health outcomes, ensurall individuals receive care that is fair, respectful, and responsive to the needs and circumstances.

Infographic: What is Equity Oriented Care?



EOC Key Element: Trauma - and Violence - Informed Care: The Agency of Canada states: Trauma-informed approaches are fam organizations and service providers. [Over the past decade] this expanded to include "violence", an important change in the lan underscores the connections between trauma and violence, w to interpersonal violence like IPV, and structural forms of viol GBV, such as misogyny. Trauma - and Violence-Informed 4 principles to be integrated into the organizational cultury walked best with cultural humility.

Infographic: Apply TVI Principles



EOC Key Element: Substance Use Health: Older wo may turn to substances as a coping mechanism to r and physical pain associated with their trauma. Su a continuum that encompasses beneficial uses, reharmful uses and consequences. Harm reduction minimize ill health and other harms in relation to use stigma experienced by older women must,

Infographic: Substance Use Stigma of Older



and care to REBALANCE EOC Key Element: Cultural Safety / Racis older women may face discrimination based u orientation, ability, immigration status, language, ge. intersecting forms of oppression shape how GBV is expend to. Power imbalances between service providers and service usercompound harm, especially when implicit biases go unexamined. Meaning equity-oriented responses require reflection on how these biases influence decision-making, access to care, and the quality of support offered.

Infographic Implicit Bias

Recognize power imbalances between service providers and older women Cultural and Institutional Authority: Cultural and Institutional Authority:
Service providers often embody the institutional authority of the organizations they represent

Technical jargon, accomms and professional language can be difficult to understand and create barriers to Most people recognize when they don't have power and less often when they one Julie Diamond Power. A User's Glade Decision-Making Authority

When service providers know best and undaterally make decisions older women may feel that they must meet certain expectations or conform to receive the help they need Knowledge and Expertise

Knowledge and Experise Can be romat education and expertise can be successfully for generations of authorized to successfully for generations of women raised to respect and defer to authority.

awareness

Social and Economic Power

Older women experience compounded power inbalances from other forms of

aschaelism saciansism ableism facism homophobia etc These interse Older women experience compounded power imbalances from other forms of declars design marginalization and undermine agency and self-worth.

 Be mincful about how you use your authority and status · Value different kinds of

trowledge including life experience and oral traditions

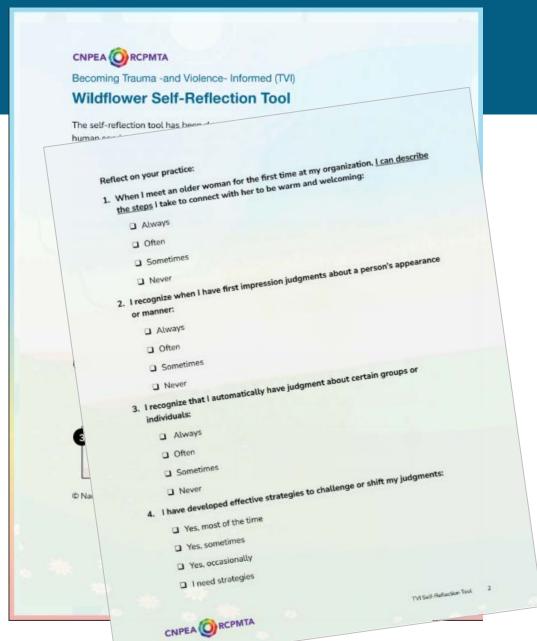
· Listen for the incredible ways that women keep themselves sate in dangerous situations

Reflect those strengths back

 Take time to make a genuine connection so that you can really Use your power to make the

system work for this person in

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# Self-reflection tool

Developed for professionals working in any field of human services who want to improve their practice in working with older women who have experienced gender-based violence (GBV) through the integration of trauma – and violence- informed principles.

## Workaround Skillset

- 1. System Awareness & Strategic Navigation
- 2. Trauma –and Violence-Informed Practice
- 3. Ethical Courage and Advocacy
- 4. Creativity & Problem-Solving
- 5. Emotional Intelligence & Resilience
- 6. Power Literacy

#### The Workaround Skillset

#### 1. System Awareness & Strategic Navigation

- Understanding where flexibility exists within policies and procedures
- · Identifying leverage points where advocacy can shift outcomes
- · Working within constraints without reinforcing harmful structures

#### 2. Trauma - and Violence-Informed Practice

- Seeing the individual beyond the intake form, prioritizing unique needs, agency, and strengths
- · Being able to build trust quickly, especially in crisis situations
- Recognizing trauma responses and adjusting interactions to avoid retraumatization

#### 3. Ethical Courage & Advocacy

- · Willingness to challenge norms and push against bureaucratic inertia
- · Advocating within institutions while protecting individuals from harm.
- · Holding systemic inequities in view while taking immediate, practical action

#### 4. Creativity & Problem-Solving

- · Finding non-traditional solutions within restrictive environments
- · Collaborating across roles to piece together resources and supports
- · Anticipating barriers and proactively finding workarounds

#### 5. Emotional Intelligence & Resilience

- · Managing moral distress when systems fail people
- Practicing boundary-setting to sustain long-term advocacy work
- Engaging in collective care to prevent burnout and isolation
- Demonstrating Power Literacy in navigating resistance, power issues

Workarounds as a Path to System Change

Workarounds are not stopgap measures. They reveal the possibilities within systems. By naming, sharing, and institutionalizing these adaptive skills, the exception becomes the rule, shaping services that are responsive, humane, and equity-driven by design.



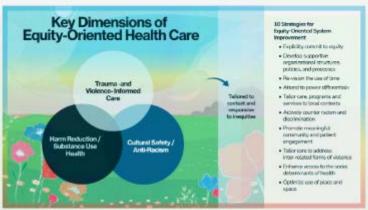
#### Wildflower Organizational Assessment

#### Introduction

The Wildflower organizational assessment and self-reflection tool will assist professionals and their organizations in developing policies and practices that create the conditions for providing exceptional service to older women and gender-diverse individuals who have experienced gender-based violence (GBV). The resource guide and tools have been created drawing from the research into Equity Oriented Care (EOC).

#### **Equity Oriented Care**

EOC is an evidenced-based model of care and a philosophy that was developed for the Canadian healthcare sector. EOC can be implemented through 10 strategies in any human service. Studies have shown that EOC addresses the systemic inequities and social determinants that impact health outcomes, ensuring that all individuals receive care that is fair, respectful, and responsive to their specific needs and circumstances.<sup>1</sup>



Adapted from Browne et al., 2015, used with permission

# Organizational Assessment

Equity Oriented Care – evidence-based model of care and a philosophy.

Studies have shown that EOC addresses the systemic inequities and social determinants that impact health outcomes, ensuring that all individuals receive care that is fair, respectful, and responsive to their specific needs and circumstances.

Browne, A. J., Varcoe, C., Ford-Gilboe, M., & Wathen, C. N. (2015). "Equity-Oriented Primary Healthcare Interventions: A Population-Level Evaluation." BMC Health Services Research, 15, 31.

## Safety and Respect at Work

Professionals face systemic conditions that expose them to gender-based violence (GBV) and other forms of harm, at times from within their own organization. Employers should have a comprehensive policy on workplace violence and harassment and HR policies that are regularly updated and filtered through a gender and intersectional lens that explicitly includes age protections.

Older female professionals face ongoing challenges regarding **job security.** 

They are more susceptible to **involuntary termination** compared to their younger counterparts.

Review pay equity and benefits to ensure older women are not disadvantaged

Provide flexible work options and accommodations for health-related needs Ensure succession planning and leadership development pathways include older women

Monitor workload and burnout risks, as older women often shoulder additional responsibilities Actively seek feedback from older staff about their experiences



#### Nutrients for the Soil:

#### Wildflower GBV Primer with Pathways for Healing

- 20 Questions and Answers for Human Service Professionals on older women's experiences of gender-based violence (GBV)
- Pathways for Healing: Honouring the Strength and Healing of Older Women who are GBV victim-survivors

#### GBV Knowledge Check: 20 Questions

#### Basic Awareness & Knowledge

- 1. True or False: Older women do not commonly experience GBV.
- True or False: Emotional abuse, financial control, and neglect, are not considered GBV.
- True or False: Intimate partner violence (IPV) fades away as couples age.
- True or False: Older women are just as likely as younger women to report or disclose GBV.
- True or False: When a man kills his older ill partner out of love or to "end her suffering," it is not IPV.

#### Intersectionality and Structural Violence

- True or False: Ageism and sexism overlap to increase older women's vulnerability to GBV.
- True or False: An older woman's experience of GBV varies depending on who she is, where she lives, and how others see her.
- True or False: Collectivist cultures are more tolerant of gender-based violence than individualist cultures.
- True or False: Cognitive impairment increases the risk of experiencing harm in institutional settings.
- True or False: Colonization and systemic racism continue to expose older women to GBV.

**GBV** Primer

**20 Questions and Answers** for Human Service Professionals on older women's experiences of gender-based violence (GBV)

**Pathways for Healing:** Honouring the Strength and Healing of Older Women who are GBV victim-survivors

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#### The Wildflower Guide

Executive Summary
A Word About Language
What Women Told Us
The Wildflower Framework
Theory of Change
Equity-Oriented Care
Gender-Based Violence

Download the Wildflower Guide PDF

Final Thoughts

## **Gender-Based Violence**

Are you confident about your knowledge about gender-based violence and women 55+?

What should I know about supporting older women and gender-diverse people who experience multiple forms of discrimination?

Whose who identify as:

Indigenous	Francophone	Living with a Disability
Immigrant or Refugee	Racialized	2SLGBTQI+
Neurodivergent	Living with Dementia	Living Rural or Remote

How do social and economic factors impact older victim-survivors?

Housing Poverty

Mental Health & Addictions Employment

# THIS-person led: when the exception becomes the rule

**Every person is unique:** care starts with *this person*, not in the future, not from averages, categories, targets or efficiency metrics.

Exceptional care is the norm: what used to be rare — listening deeply, respecting pace, centering lived experience — becomes the rule.

Reshapes the system: with consistent practice, professionals transform rigid structures into living systems of equity – it's happening.

Care without exception

# **YOU Power**: your every action has an impact

**You are the intervention:** it's your action — your presence, your listening, your choices, your system knowledge that carry transformational potential into an encounter.

Care is not neutral: every interaction either reinforces the status quo or opens cracks for equity and healing.

**Everyday acts matter:** The way you greet someone, how you hold their story, whether you make space for their pace — these are meaningful interventions.

You are reshaping the system from within: by practicing relational, equity-oriented care, you model and plant seeds for systemic change.

## Care as resistance

# Stay in touch with us



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## **Margaret MacPherson**

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# **AGING VIBRANTLY**



Conversations to Empower Seniors



Visit: <a href="mailto:eapon.ca/podcast">eapon.ca/podcast</a>





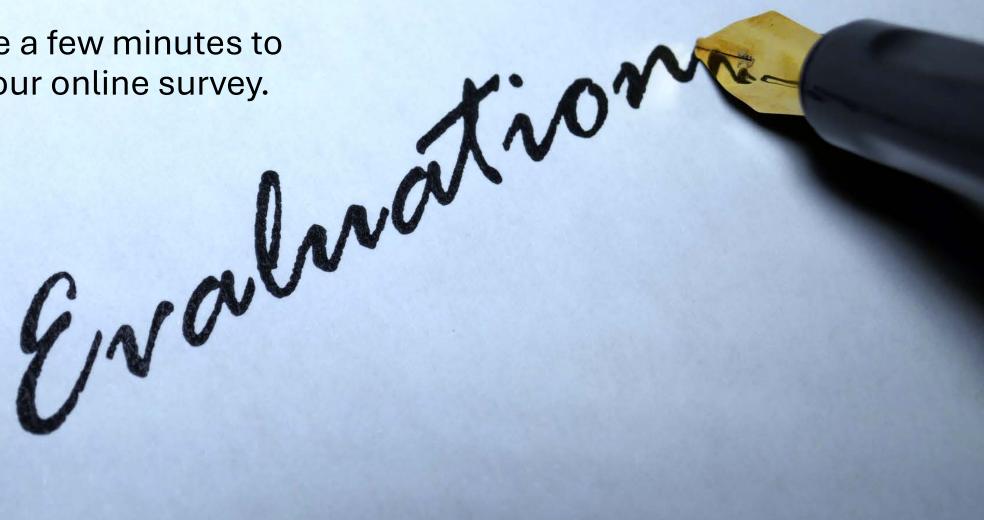
# Join us now...to provide your Feedback

## **WE WOULD APPRECIATE HEARING FROM YOU!**

Please take a few minutes to complete our online survey.









# **Contact Us**













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