

Promising Practices

ACROSS CANADA FOR
HOUSING WOMEN WHO ARE OLDER AND
FLEEING ABUSE

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The logo for Canada, featuring the word "Canada" in a large, black, serif font. A small Canadian flag is positioned above the letter "a".

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The opinions and interpretations in this publication are those of the author and do not necessarily reflect those of the Government of Canada.

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Statement from Jill Hightower

“ Women acquire great resilience and develop coping skills through life experience. Never is resilience needed more than in later life. Our stories are mapped by educational opportunities, work experiences, community involvement, marriage and love relationships, divorce and separation, mothering and grand-mothering, and death of loved ones. Some Canadian women’s experiences include being a war victim, a refugee, an immigrant, a First Nations, Métis or Inuit woman, or a woman with disabilities. A woman’s background may include poverty, child abuse, and spousal violence - all of which often continue into old age.

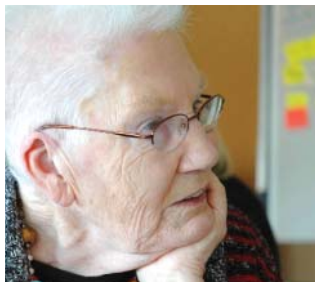
There are good things about getting older, such as watching younger generations among family and friends grow and develop, and becoming more appreciative of friendship, fun and support from friends and relatives.

You may become a grandmother. The downside is that people with ageist and sexist attitudes and behaviours judge us by our physical appearance and put us in that homogenized ‘aged’ category. Many of us feel invisible - no one seems to notice us anymore. Many people believe we have little to offer the world around us, that we should fade into the background. They may treat us like we are an economic burden, and this can make it difficult to ask for help. Asking for help should not threaten a woman’s independence, or raise questions about competence. But we live with this fear of losing control over our lives, if people think we cannot handle things on our own.

Asking for help should not threaten a woman’s independence, or raise questions about competence.

These mistaken perspectives on our role and place in society are rarely challenged. These views support the neglect of our needs and circumstances in both public policy and private settings. Gender and age affect access to resources and opportunities, and shape choices at every stage of life. Options and challenges often reflect social, health, and economic differences. We must be aware of the age-related issues women face in order to provide services that truly address their needs, desires and aspirations for the future.

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Jill Hightower gave an opening presentation at the Promising Practices National Advisory Committee meeting, in 2014. She spoke as both a woman who is older - Jill is 79 years of age - and a woman who has done research on violence against women who are older. Jill was on the initial Planning Committee set up in 2012. Since retiring as Executive Director of the BC Institute Against Family Violence, in 1998, Jill has been a partner in a small research and education consulting group focused on public policy, health and social issues affecting women who are older. Jill has published and presented papers in print, at conferences in North America and Europe, and at community forums across Canada.

She currently serves on the advisory committee of the Older Women’s Dialogue Project and is Co-Chair of the Board of Directors of the BC Association of Community Response Networks.



Executive Summary

Since 1987, Atira Women’s Resource Society has provided short-term and crisis housing for women fleeing violence.

Atira now operates 18 residential programs across the Greater Vancouver Area identifying and responding to the varied and unique needs of women who are vulnerable and marginalized. Atira opened Ama House in South Surrey, BC in 2004, Canada’s first specialized transition house for women who are older. In anticipation of Ama turning 10 and identifying the need for program evaluation, Atira discovered that Ama House was still the only specialized transition house in Canada serving the needs of women who are older. This surprising discovery prompted the Promising Practices across Canada for Housing Women who are Older and Fleeing Abuse project.

A lot has been written about violence against women and about elder abuse. However, the abuse of women who are older is rarely examined. Understanding and supporting women who are older and fleeing violence is challenging work that demands knowledge of both women’s anti violence work and elder abuse.



The network of women’s transition and safe houses and shelters holds great potential for adapting to meet the needs of women who are older; however, specific attention to their distinct needs is necessary.

Promising Practices across Canada for Housing Women who are Older and Fleeing Abuse explores women’s lives across race, class, gender, sexual orientation and ability. Women who are older and fleeing abuse are from all walks of life, from small towns and rural Canada, small and large cities

and include First Nations, Métis and Inuit women, women of colour and immigrant women. Promising Practices challenges assumptions about women who are older and warns against stereotyping. Promising Practices reflects a lived experience, identifying what practitioners and women who are older want to meet their unique needs.



Promising Practices across Canada for Housing Women who are Older and Fleeing Abuse does not offer best practices. Rather, it offers promising practices, a step towards producing best practices. Sharing knowledge and starting a conversation about lived experience and strategies to emulate, explore, adapt and evaluate promising practices. Over time, best practices will develop and be determined by women working to end violence against women.

Promising Practices across Canada for Housing Women who are Older and Fleeing Abuse will benefit organizations that have developed or are developing safe, supportive housing specifically for women who are older. As well, Promising Practices will assist those who are exploring how to adapt their programs to be more responsive and inclusive of women who are older. Ultimately, women who are older will benefit from these promising practices, which reflects women's stories, honours their experiences, both positive and negative, and their views on what is working and why.

Promising Practices across Canada for Housing Women who are Older and Fleeing Abuse offers the following 11 promising practices for consideration:

1. Nurture an environment that values women who are older;
2. Develop outreach strategies tailored to women who are older;
3. Provide individualized, woman-centred support for women who are older;
4. Focus on relationships and relationship-building for women who are older;
5. Focus on safety for women who are older;
6. Facilitate access to health care for women who are older;
7. Develop strategic partnerships to help women who are older get the services they want and need;
8. Provide women who are older with more time to transition;
9. Support women who are older after they leave the transition house;
10. Integrate evaluation into practice, including documentation of use of services by women who are older; and
11. Work towards system change for women who are older.

Confronting Abuse and Violence of Women who are Older

For most women including women who are older, abuse happens in the context of relationships, which is what makes it so painful and dangerous. Abuse consists of actions taken on purpose and with intent to harm and to reduce a woman's sense of well-being and safety in the world. Abuse can be one act; more often it is many actions occurring over a period of time.

Women who are older experience many of the same abusive behaviours as women who are younger. Women who are older experience physical assaults that cause broken bones, bruises, burns, cuts, stab wounds, bite marks, concussions, skull fractures and perforated eardrums. Women who are older experience sexual violence resulting in sexually transmitted diseases, chronic genital or pelvic pain, bruising and tearing. Women may experience violence



Women who are older are often abused by adult children, grandchildren and other younger family members

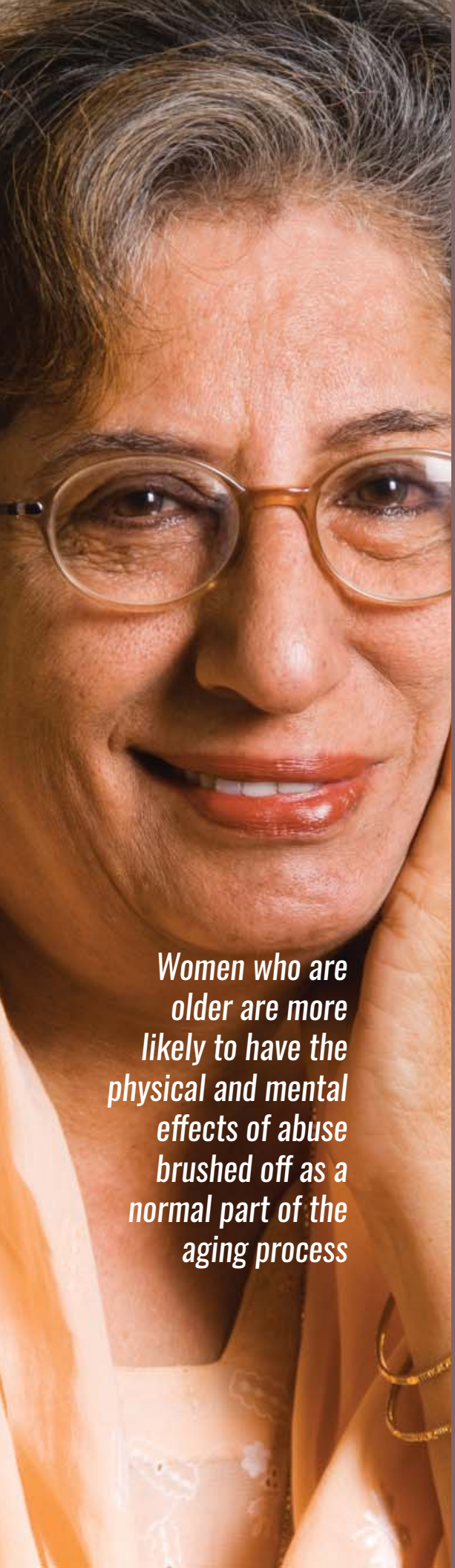
for the first time in old age, or navigate an abusive relationship for decades. It is problematic to generalize. Every woman's experience of violence is unique to her.

Women who are older may be healthy or they may be unwell. They may have less self-confidence as a consequence of enduring years of abuse. Women who are older may have a hard time feeling safe anywhere. Women can feel shame as a result of the harm inflicted on them. Women can feel responsible. Some women who are older may have difficulty focusing on themselves and their own well-being and instead focus on their abuser or others they feel responsible for. Women who are older may be or feel at risk of losing their ability to live independently if they leave their home.

Not exclusive to the abuse of women who are older though more common, is the withholding of a walker, scooter, wheelchair, glasses and or dentures. Because women who are older may be more likely to be on medication, medication may be denied or a woman may be purposefully over-medicated. Her medication may be stolen by family members or other caregivers. Women who are older and own their own homes may be forced to sell their home and give proceeds to their abuser(s). Their pension money may be stolen or they may be pressured to sign over valuables. Sometimes women who are older are forced to provide children or grandchildren with an early inheritance. Women who are older may be denied the company and love of grandchildren.

Women who are older experience certain unique dynamics because they are older.

Women with experience supporting women who are older point out that they are not only abused by their partners or spouses. Women who are older and experience abuse are often abused by adult children, grandchildren and other family members. Women participating in this project also mentioned abusers who are caregivers, landlords and neighbours, as well as financial predators and those who operate phone or online scams.



Women who are older are more likely to have the physical and mental effects of abuse brushed off as a normal part of the aging process

Leaving an abusive relationship is difficult for all women, regardless of age. A woman who is older will need the strength to ignore threats made by the person who has or is harming her. She may need to overcome the belief that her abuser is all powerful. She may have to accept the reality that leaving could place her in further danger or expose her to different forms of abuse, violence or intimidation.

Women who are older confront many of the following unique challenges:

1. **Intergenerational or long-term violence** - A woman who has experienced violence throughout her life may not know or remember a life without abuse. She is more likely to have the physical and mental effects of abuse brushed off as a normal part of the aging process so her abuse goes unrecognized;
2. **Providing and receiving care** - A woman who is older and living with violence may be receiving care from or providing care for a family member, including her abuser. This dynamic has significant implications on whether she will feel comfortable leaving an abusive relationship and on the kinds of support she might need;
3. **The myth of caregiver stress** - A woman who is older may experience violence from her caregiver who may be a family member. The myth of the caregiver who is driven to helplessness, rage and frustration due to overwhelming work and responsibility is often used to rationalize violence and abuse against women who are older. A caregiver who abuses a woman who is older and who may be her spouse, an adult child or grandchild or a family friend, is an abuser;
4. **Loss of home** - Leaving home for a woman who is older can be especially hard. The fear of losing your home and the lack of alternative safe, affordable and stable housing can make a critical difference to a woman's ability to escape an abusive situation;
5. **Threatened autonomy** - An abuser may threaten to force a woman who is older into a care facility. She may fear having her decision-making rights taken away. She may fear losing her ability to live independently;
6. **Financial insecurity** - Navigating pensions, benefits and health insurance takes resources and time. Some women have not held paid employment, have limited employability or are past working age. A woman may also be experiencing abuse by her private guardian;
7. **Loss of community** - A lifelong attachment to a community makes leaving that community especially hard. For immigrant women who are older, particularly if a woman speaks a language or languages other than English, perceived loss of community may be terrifying. Some women immigrate to Canada in their later years and or come to Canada to assist with the care



Despite these challenges, women who are older do leave people who harm them. However, it is generally not a one step process.

of grandchildren. A woman can find herself trapped within her community in an abusive situation but at the same time fear rejection from her family and community;

8. **Generational beliefs** - A woman who is older may have more traditional attitudes regarding marriage, family, gender roles and privacy or loyalty vis-à-vis family matters. Discussing personal or family problems with strangers may seem unacceptable;
9. **The abuser is your child** - A woman who is older may feel or be made to feel she has failed as a mother. She may feel guilty. She may be afraid to seek help for fear of losing her relationship with her children or grandchildren. A woman who is older may wish to maintain family relationships above all else;
10. **Family dynamics** - Members of the family may not support their mother or grandmother if they either do not perceive the abuse to be significant or do not want to take on a caregiving role. A woman who is older may be faced with the shock and disbelief of friends and family who can't accept her story of abuse;
11. **Remote and rural life** - A woman who is older and living in a rural community may find her nearest neighbour kilometers away. Family members as they get older may move away for work or school or pass away. All of this may mean geographical isolation and increased social isolation with an abuser. For a woman who is older and isolated in a violent relationship there is no quick way out. The hardship is compounded when she does not have a telephone or is denied access to a telephone. Her situation is made even worse, for example, when she has no or limited access to transportation; when a one-way taxi ride can cost \$50.00 or more. For a woman who is older, her livelihood, community and foundation may be rooted in her land, the very land she may need to leave for safety;
12. **LGBTQQ community** - Many members of the lesbian, gay, bisexual, queer, transgender and two-spirit community have been taught to hide their sexual orientation and or live a false gender identity. LGBTQQ seniors report heightened fear and anxiety should they disclose their sexual orientation or gender identity to service providers and have little faith, based on their lived experience, they will not suffer further victimization; and
13. **Lack of knowledge about transition houses and other services** - A woman who is older may be less likely to know services are available. She may also have more difficulty reaching out to service providers, particularly if she has a disability or struggles with mobility issues. If she is new to Canada and or has language barriers, her difficulties may be exacerbated. She may not know that services exist and, in fact, the services may not be available.

Despite these challenges, women do leave people who harm them. Abuse of the body, mind and soul of a woman however necessitates a complex and compassionate response to foster healing, a response that begins with believing her story, setting aside all judgement and sincerely listening to and offering her physical and emotional safety. Like younger women, a woman who is older may leave and return many times during the process of working through the violence and abuse in her life. Women possess tremendous resilience, including those who have developed myriad skills to cope with a lifetime of violence and abuse, and they can heal provided they experience the support, backing and compassion we all need and deserve.

A Statistical Snapshot

Statistics

Statistics about violence against women, particularly women who are older, are not always available and not always reliable. There is a real need for statistics to be more responsive to gender and age in order to document violence. Some of the problems with statistics include:

- Disregard for gender - focus on seniors as one homogenous group, rather than women and men;
- Reliance on self-reporting to police, medical professionals or others, rather than broadly-based surveys;
- Focus on physical violence, which ignores emotional abuse, financial exploitation or other types of abuse;
- Only reporting on violence within the family, which ignores violence by strangers or friends; and or
- Lumping women who are older into the age category of “65 and older”.

For these reasons and more, statistics about violence against women who are older are limited.

Available research reveals the following about violence against women who are older:

“Family violence” against senior women in Canada was 62.7 women per 100,000, significantly higher than the rate for senior men at 49.7 per 100,000. ”


As reported by Statistics Canada in its *2013 Family Violence in Canada Statistical Profile* based on police-reported data.

“The involvement of health and social service agencies in Canada was about two to three times higher in incidents of violence against women, compared to violent incidents directed at men. ”

Statistics Canada’s self-reported victimization data revealed this gender variation in its *General Social Survey, 2009*.

“28% of older women in Europe have experienced violence or abuse in the last 12 months; emotional abuse being the most common form of abuse. ”

AVOW Project, DAPHNE III Study, European Union, 2011.



“Family violence” against senior women was 62.7 women per 100,000, significantly higher than the rate for senior men at 49.7 per 100,000. ”

As reported by Statistics Canada in its *2013 Family Violence in Canada Statistical Profile* based on police-reported data.

Electronic Survey

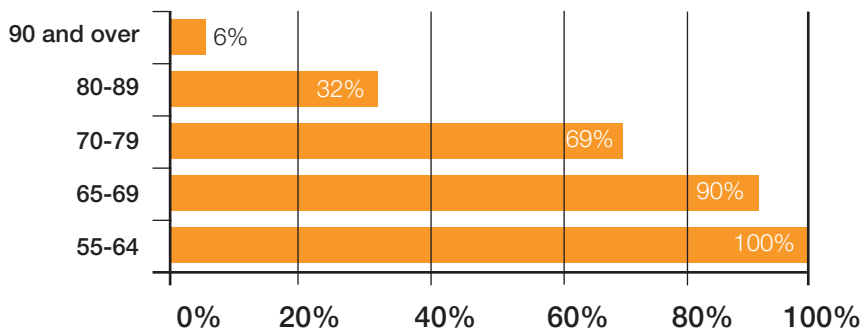
Atira Women's Resource Society commissioned an electronic survey of over 400 organizations in 2014. Twenty percent or 83 organizations responded to the survey. Organizations were varied and included transition and safe houses and shelters located in rural, remote and urban communities across the country.

All 83 transition and safe houses that responded to the survey have assisted women who are older. Some provided multiple services. The majority, 66% of respondents, have helped 50 or more women who are older in the last 25 years.

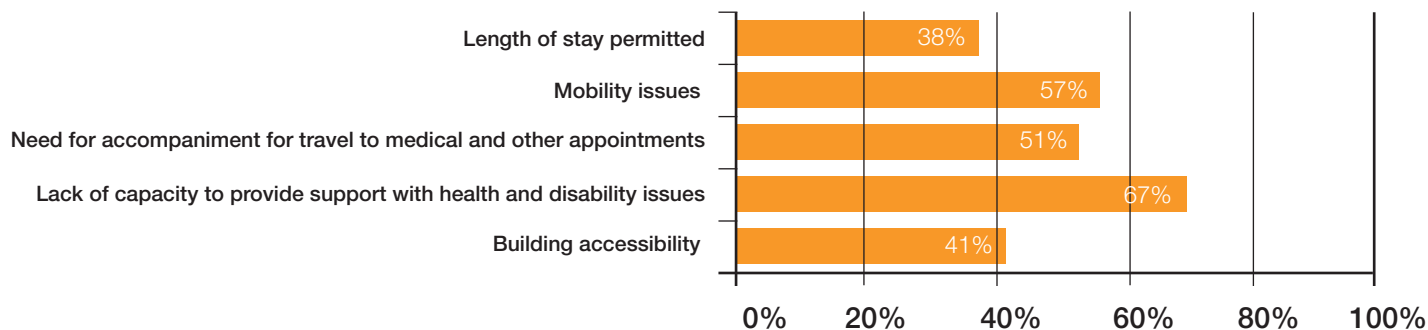
Women rely on anti-violence services throughout their lives. More than 69% of respondents provided support to women in their 70s and 32% provided support to women up to 89 years of age. 90% of those surveyed had provided support to women between the ages of 65 and 69.

The Survey also revealed that transition and safe houses encounter financial and institutional obstacles to supporting women who are older, which restricts their ability to meet the full needs of women. 67% of respondents lack the capacity to provide support to women with health and disability issues. More than half of respondents also identified challenges supporting women with mobility issues and supporting women who require help traveling to medical or other appointments.

Which age group(s) of women who are older does your organization have experience delivering services to?



What barriers have you encountered in delivering services to women who are older?



Promising Practices

1. Nurture an environment that values women who are older

Fundamental to supporting women who are older is building and fostering an environment of value and respect. Nurturing an environment that values women who are older, means assumptions must not be made about a woman's ability to think clearly or to make her own decisions. It means never assuming what would be best for a woman. Instead ask her opinion and respect her knowledge and wisdom. Women who are older often feel ignored and invisible: it can be a powerful practice just to listen to a woman. Creating an environment that values all women, including women who are older, will help women feel self-worth and begin to heal.

A pro-aging approach means recognizing the effects of aging and supporting a woman to adapt and flourish as she is. Women who are older are diverse because women experience different challenges and barriers as they age; being 90 can be very different from being 60. As well, the experience of aging is influenced by poverty, disability, gender identity, sexual orientation, immigration, being First Nations, Métis or Inuit or being a woman of colour. A transition house, safe house or shelter that embraces a pro-aging approach will encourage and support all women to access services and provide opportunities for women to give feedback about the services they are receiving, as well as include women who are older as staff and volunteers.

The opposite of a pro-aging approach is an ageist policy approach, which misrepresents and stereotypes women who are older or may overlook them altogether. Ageism can be unconscious. Ageist thinking is based on the assumption that everyone is young. This results in an absence of services that address the needs of women who are older. As with racism, sexism, heterosexism, genderism, classism, and ableism, residents and staff may require support and training in order to recognize and reject negative stereotypes. It is important that everyone at the transition or safe house unlearns dominant cultural values around aging, such as mistaken notions that women who are older are frail, dependent, less intellectually sharp and not active or engaged in community.

“They don’t just listen, they hear you. They are never in a hurry; they never forget; they pay attention to what we say.”

Resident, Ama House,
South Surrey, BC,
Atira Women’s
Resource Society



Staff and volunteers who are women who are older

Hiring staff and recruiting volunteers who are women who are older is critically important, including women who are older and who represent the diversity of women living in the community. This means hiring women and involving volunteers who are older and who are First Nations, Métis and Inuit, women of colour, immigrant women, lesbians and women who are transgender. Involving a diverse group of women who are older will increase program knowledge and understanding, which in turn may increase accessibility to the transition house for women who are older. Staff who participated in this project were passionate about learning more about aging and about abuse and violence against women who are older. Staff understand that their life experience, skills and knowledge all contribute to an inclusive and welcoming house for all women, including women who are older.

Nurturing an environment that values all women includes women who are older and who may not be from the dominant culture. This means moving beyond cultural sensitivity to analyze and undermine power imbalances, institutional discrimination and colonization. Woman centered and anti-oppressive approaches must respect and value all women. Women interviewed for this project emphasized the importance of working across identities and cultures, as well as the value of Elders in supporting intergenerational learning and fostering cultural safety.

Many women Elders volunteer for the Cambridge Bay Community Wellness Centre in Nunavut, which serves a primarily Inuit population. 83% of the population of Cambridge Bay is Inuit. The Community Wellness Centre also employs women Elders, predominantly in counseling roles. Its community partner, St. Michael's

Shelter, also employs women who are older who are familiar with the social issues experienced by women who use the Wellness Centre, including residential school survivors. Partnerships with the local Kitikmeot Inuit Association and Kitikmeot Heritage Society support the Wellness Centre to incorporate Inuit values and traditional practices wherever possible. When there is a woman who is older in the shelter, the Wellness Centre endeavours to provide traditional foods when in season.



Atira Women's Resource Society provides housing, advocacy and support to any woman who lives full-time and identifies as a woman and meets Atira's mandate. Atira strives to make their services more accessible to transgender, queer, two-spirited and intersexed women through not just inclusion but also by providing education and information to all women and by helping women to build empathy for one another. Atira recognizes the barriers and stigmatization faced by women who do not fit into society's gender binary system and the violence, poverty and discrimination they encounter in life and as they age.



Georgette
75 years of age

Georgette came to the shelter after her daughter's initial inquiry to the shelter. She was extremely anxious when she arrived, worried about the mental state of her husband, who had threatened to kill her on numerous occasions. In recent years, her husband of 42 years started drinking a lot and had become obsessive, constantly asking her where she was going, accusing her of adultery, and following her. He criticized her and ridiculed her in front of neighbours. Over time Georgette had become isolated, powerless, and fearful.

With the support of transition house staff, Georgette decided to divorce her husband. Staff supported her through the divorce. She was able to get back some of her personal belongings, utilizing police accompaniment. The police seized her husband's firearms in the process. Three months into her stay at the transition house, Georgette's daughters disclosed childhood sexual abuse by their father. Georgette spent the next seven months at her daughter's home. Ten months after arriving at the transition house, Georgette got her divorce and was able to move back into her home. She is now working in a pastry shop.

2. Develop outreach strategies tailored to women who are older

Community outreach strategies need to be tailored to reach women who are older. Sometimes women who are older may be unaware of anti-violence services available in the community as well as other options for leaving abuse. Common approaches to promote transition houses, safe houses and shelters such as brochures or social media ads, may not resonate with women who are older. Outreach strategies also need to be tailored to reach immigrant women who are older, some of whom may be unable to communicate in English. Forming partnerships and leaving print material at places where women who are older may visit, such as doctor's offices, public libraries, banks, lawyers' offices, faith institutions, immigrant organizations, senior's housing, senior's centres, Friendship Centres and government agencies, may connect women who are older with services available in their communities.

“ Education for the community would help. Older women from the immigrant community have little knowledge and rely on their community. We need to connect with immigrant groups and not just immigrant women individually.... If community groups, temples and mosques can invite folks to speak about services, and inform about options it would help. ”

Shahnaz Rahman, Manager of Community Outreach
Family Law Project, West Coast LEAF



Outreach visits to women who are not yet comfortable leaving home may mean that transition house staff will need to make home visits to support a woman before she enters a transition house. Sometimes a woman who is older may want to visit a transition house or shelter to check it out. This can be an important stage in supporting a woman's decision making before she is ready to leave her abuser. Helping a woman flee violence requires staff and volunteers who are empathetic, responsive and experienced at safety planning and who have relationships with other service providers. Developing response protocols with police and health care workers, for example, will enable them to better understand when and how to make a referral for a woman who is older.

Community outreach strategies need to be tailored to reach women who are older.

L'autre-toit du KRTB serves a rural region including Kamouraska, Rivière-du-Loup, Témiscouata and Basques, in Quebec. In their experience, one of the best ways to support a woman who is older, who for various reasons may not be willing or able to leave her home, is to meet her at a local community agency or care facility. L'autre-toit du KRTB also provides support via telephone. Staff works with a woman to help her build social and family connections - sometimes connecting a woman with meaningful volunteer opportunities or arranging for home care - to help reduce isolation and risk. Staff also provides women with information about their rights and options.

Fei
73 years of age

We were asked to visit a woman who was bed ridden, terminally ill, immobile and being cared for by her long-time spouse. They lived in a trailer park and because of the close proximity of the trailers, the neighbours were hearing a pattern of behaviour they described as torture. The spouse would turn the television located at the foot of her bed, to full volume, lay the remote slightly out of Fei's reach and then leave the home for hours. He would bring her food, but place it on the floor beside the bed where she couldn't reach the plate. He would take it away later and berate her for refusing to eat. She had bruises on her arms, thought to be from pinching.

After a time, the neighbours told the home care nurses who called Atira. Atira staff began to visit Fei daily. They worked with Fei, her neighbours, the home care nurses and the RCMP. The spouse was charged and arrested and a "no-go" was placed on the trailer park where Fei lived. With the support of her neighbours and community, Fei was able to stay at home, receive the care she needed and pass away in peace.





3. Provide individualized, woman-centred support for women who are older

Women who are older are diverse. They have unique needs, desires and abilities. It is important to ask and to listen in order to find out what a woman's priorities and needs are. Women-centered support means making sure a woman has the decision-making support she needs. For example, she may make decisions freely and easily or she may find making decisions challenging. If a woman would like help making a decision, you can offer to help her contact her child or a trusted friend. Be ready to offer her information, time and support.

“ You have to be patient. It can take a lot of time to explain things. But every decision needs to come from the women, so this is important. ”

Transition House Staff, Northern Canada

Many women interviewed for this project stressed that women-centred support also means providing quiet or private space.

Atira Women's Resource Society's commitment to women-centred support is reflected in the attitudes and roles that Atira support workers play:

- women are the experts in their own situations and the decision whether or not to make changes in their lives and what kinds of changes is theirs alone;
- women who have experienced violence/abuse/trauma have developed skills and strengths to cope with their situation. Our role is to acknowledge, validate and attempt to add to these skills and strengths, not to judge women for the coping skills they have developed and not to see women as helpless and in need of being rescued;
- the goal of intervention in a residential setting is to provide a safe, supportive environment in which women have control of their living situation; and
- the primary role of the support worker is to work to support women in addressing the issues that arise as a result of their experiences and to support her right to access fair and relevant information in an effort to assist her in deciding whether or not to make changes in her life.



The North Coast Transition Society in Prince Rupert employs a Lifestyle Coach who works with each woman individually to ensure a woman is connected with the resources she needs to achieve her goals. It is not just about making referrals, rather it's about supporting whatever process a woman is going through. The Lifestyle Coach helped a woman for example, who was from another community and had no local social connections to join the senior's center and make friends.

Many women interviewed for this project stressed that women-centred support also means providing quiet or private space. Some women who are older may find the noise of communal housing stressful and overwhelming. Libra House in Happy Valley Goose Bay, Newfoundland has a quiet room within the transition house. The room has comfortable seating and is located away from communal areas and daily traffic. In this space a woman can listen to music, read a book or just sit in the peace

and tranquility of silence. Libra House's quiet room offers refuge for women, particularly for women who are older, affording them the time and opportunity to fully consider and make choices and decisions for themselves.

At Atira, supporting women who are older who are lesbian, bisexual, transgender, transsexual, two-spirited, queer, questioning, intersex or asexual, involves providing an inclusive, safe environment. Staff are required to address conflict and discrimination and through education and awareness support women to build empathy for each other, as well as build relationships with LGBTTTQ community organizations. Atira regularly refers women to organizations like QMUNITY, BC's Queer Resource Centre and to Prism Services from Vancouver Coastal Health, as well as other community organizations that offer support groups, recreational activities, workshops, education, outreach and counselling.



Reena **81 years of age**

The RCMP brought Reena to Ama House when they found her living in her car with her adult son. Her son had sold Reena's house, spent her money and on this particular early morning had left her alone in the car while he disappeared to get high. Despite this, Reena was absolutely resistant to coming to or staying at Ama. She felt responsible for her son's behaviour and she agonized over who would look after him now that she was gone. It took

months to support Reena to let go of her guilt and shame at having "abandoned" her son. Staff had to learn not only to be patient, but to set aside their judgments and honour the love Reena felt for her eldest child, despite what he had done to her and what they thought of him. Staff learned from Reena the ways in which women are made to feel responsible for their children and their children's behaviour, long after their children are adults.

4. Focus on relationships and relationship-building for women who are older

It is important to support relationship-building between the staff and women living in the house, between the women living in the house and between women and their extended family and or community. Relationships with grandchildren and other family members can be very important to women who are older and the fear of potential loss of those relationships can keep women in abusive circumstances. Intergenerational relationships can be crucial to a woman's healing. Friendships can help women to successfully navigate a transition period.

One of the things that women said they appreciated the most about the transition house they stayed at was the availability of a kind, caring listener whom they trusted. Research undertaken by the Provincial Association of Transition Houses and Services of Saskatchewan (PATHS) found that the relationship between staff and women staying in the transition house is one of the most important benefits women receive from a shelter. The Moose Jaw Transition House in Saskatchewan has implemented an in-house group program, primarily focused on relationship-building. Staff will plan events bringing women together that are currently staying at the shelter, as well as past residents. Cambridge Bay Community Wellness Centre in Nunavut organizes family fun nights and other community events, which women can attend with their extended family. Most programming offered at the Cambridge Bay Community Wellness Centre is family-oriented.

“ We've worked to design our future spaces with room for individual privacy and dignity and shared space for cooking and living to help foster relationships across age and diversity and hopefully decrease isolation. Connection is such a deep human need and in the face of intentional harm, abuse, and violence it can provide a bridge to help foster healing from the effects it has on our hearts, souls, minds, and bodies. ”

Liz Brown, Executive Director
Violence Against Women Services, Elgin County, Ontario

Sara fled to Canada after being physically attacked by seven women in her village because of her religion. She had only been in Canada for one month when her adult child died from cancer. Days after her son's death, an in-law disowned her and kicked her out of her home. She was living on the street when a multicultural community outreach worker found her and brought her to a transition house.

Sara was both physically ill and emotionally devastated because of her experiences, including not being allowed to attend her son's funeral. She stayed at the transition house for almost 2 years. In that time, her refugee applicant status was denied, but staff worked hard to get her citizenship and housing. After fighting to stay in Canada for 6 years, Sara told staff not to fight anymore. She did not want to trouble the Canadian government. She felt like a burden because she was too frail to work - but Sara was amazing. She was a grandmother and a mentor. She helped other women at the transition house. Before Sara left Canada, she told staff that the best years of her life were with the women at the house.



Sara
78 years of age



5. Focus on safety for women who are older

All women who are fleeing abuse need to have confidence that the transition or safe house that they turn to can offer them safety. Women who are older are no different. Safety can be created through various strategies, such as 24-hour staffing, security systems, reducing health and safety hazards, confidentiality around the location of the house, offering programs that foster cultural safety and developing a safety plan. For many women fleeing abuse, their lives have been chaotic. Offering consistency and predictability can also help foster a feeling of safety. Many women who are older are caregivers and so they may need a safety plan that reduces the risk for violence, while at the same time honouring a desire to provide care and support. For some women, safety also means ensuring a beloved pet or farm animals are kept safe.

Safety for women who are older may include being safe from an abusive adult child, a grandchild, a spouse, another family member or close friend or a stranger or predator who targets older people because of their perceived vulnerability. For a woman who came to Canada as an immigrant, addressing safety may mean supporting her to address underlying immigration issues that compromise her safety. It is not uncommon for women who immigrate to Canada to arrive by way of a family sponsorship arrangement and an expectation that she assist with care of grandchildren. Safety may mean providing services related to her status in the country.

Dixon Transition House in Vancouver serves a significant number of women who are refugees or immigrants. Addressing safety and supporting recovery at Dixon Transition House means:

- Writing letters of support highlighting how a woman is an asset to Canadian society and how she is emotionally and socially connected here;
- Working with immigration lawyers who provide free legal services and community support workers to help women access legal advocacy; and
- Assisting with humanitarian and compassionate-grounds applications.

Safety for women who are older and who may have mobility issues is also addressed through accessible housing and universally designed transition houses, safe houses and shelters. Accessible houses mean women can retain their independence and dignity while reducing serious health and safety hazards related to falls and injury.

Strategies to increase accessibility are included in a 2010 Canada Mortgage and Housing Corporation document entitled: **Accessible Housing by Design - House Designs and Floor Plans**. Although not specific to transition and safe house design, some general design strategies include:

- Universal design - Housing that can be used by women of all ages, abilities and mobility levels. For example, features include lever door handles, enhanced lighting levels, stairways that feature handrails that are easy to grasp, and easy-to-use appliances;
- Physical accessibility - The house should be physically easy to navigate. For example, features include sensors for lights, grab bars in washrooms, hard-non-slip flooring surfaces, faucets that can be operated with minimal strength, wheel-in shower stalls, and kitchen work surfaces which allow for standing and seated use, and space under counters for a wheelchair;
- Familiar signage and clutter free space - Putting a familiar sign or symbol on her bedroom door can help a woman with Alzheimer's disease or dementia remember where she is staying. It is also helpful to keep hallways clear of clutter and move furniture from the centre of the room to reduce the risk of tripping; and
- Safety within the house - Securing or clearly marking potentially hazardous items such as cleaning supplies and medications.



Helga
81 years of age

“ Helga had a long, traditional, and non-violent marriage with her husband. She led on the home front – cooking, cleaning, and staying home with their children. He worked hard outside the house to pay for their home and make sure their children had opportunities to pursue education. After he died, Helga moved in with her daughter and son-in law so they could help with her health and mobility challenges. Months later her son in law began yelling at her. Calling her horrible names and later apologizing and blaming his behavior on the stress she caused them by sharing the home. Helga called us to find out how to get into a nursing home so she could make it easier for them and hoped that if she did that his yelling would stop. When we met, she was able to say more. Helga kept her eyes downcast as she described the sexual abuse her son in law had done to her. How she was confined to a wheelchair and was afraid to tell anyone what happened in case her mental capacity was questioned. She was terrified that she would not be believed and scared about what might happen next to her and her daughter.

”

6. Facilitate access to health care for women who are older

A woman is more likely to successfully transition if she has access to health care and is supported so that she can navigate a complex health care system. This support can come from partnerships with service providers but it can also result from transition and safe house staff providing on-site care and assistance for women. Key supports include assistance with personal care, help completing forms, access to holistic health care, getting the right medication and prescriptions, contact with health-care professionals and access to culturally-responsive health practices.

Sometimes the staff's role may be to advocate on behalf of women or assist women to advocate on their own behalf. This may mean assisting a woman to be heard and respected and supporting her to make choices that honour her wisdom. Health may also include spiritual health and traditional health. It is important to support women to maintain these connections.

The Native Women's Shelter of Montreal employs a holistic health coordinator and a substance use worker. Their Holistic Health Project addresses both individual health and systemic barriers to well-being for First Nations, Métis and Inuit women. The project aims to provide access to culturally relevant health care including:

- Traditional talking circles and ceremonies;
- Accompaniment to diagnosis, care, treatment and social activities for women living with or at risk for HIV and related diseases and conditions;
- Supportive counseling and access to a Traditional Healer;
- Substance use support groups, including weekly in-house meetings; and
- Testing and follow-up care, treatment and support through the in-house clinic as well as HIV/AIDS risk reduction counseling.

The Centre féminin du Saguenay, located in Chicoutimi, Quebec, has found that women who are older are often over-medicated, especially on anti-depressants. As well, women are not always aware of the reasons they take various prescriptions. The Centre works in partnership with hospital physicians, psychiatrists and the Centre locale de services communautaires (health and social services agencies) to ensure a woman receives a comprehensive re-evaluation of her medication needs. Centre staff also provide follow-up support to make sure a woman understands why she is taking the medication, her right to choose whether or not to take it and how the medication interacts with other medications, drugs and alcohol.



“They helped me set up appointments to get my eyes and hearing checked. After I got here I got a family doctor right away and a dentist. I needed a family doctor because the doctor at the clinic would not renew my prescriptions unless I had a family doctor.”

Resident, Ama House, South Surrey, BC, Atira Women's Resource Society



Anne
83 years of age

When Anne came for intake at the safe house she had bruises on her arms and legs from being pushed down the stairs. Anne had endured many years of emotional abuse from her husband, who she had been married to for 45 years. The abuse had recently increased in frequency and escalated to physical violence. Her husband's adult son, who lived with them, was also abusing Anne. Her husband refused to ask his son to leave.

While at the safe house, staff assisted Anne in finding a new doctor. Her family doctor - both hers and her husband's physician for many years - had prescribed painkillers and advised Anne to go to marriage counselling. Anne also learned about the dynamics of abuse, was assisted in opening a bank account, and got help to find a new place to live. Safe house staff

assisted Anne in getting someone to go with her to her home to gather and pack her personal belongings, while a security guard stood by. Anne is now in the process of obtaining a divorce. Anne wants to have her husband and his son charged with assault, but will wait until the divorce is final. She is fearful that if she does so sooner it will further anger her husband, cause delays, and increase her risk of violence.

Anne said that in the meantime, her husband continues to tell everyone, including her 89 and 91-year old sisters, that it was her fault. Her sisters have reprimanded her for leaving her husband as "a wife's place is beside her husband." Anne has reconnected with her daughter from her first marriage. Her daughter came from out-of-town to stay with her mom at the safe house for a weekend.

7. Develop strategic partnerships to help women who are older get the services they want and need

“ Shelters and domestic violence service agencies frequently refer clients out to other services—collaboration is an important part of our work. It is important for our member shelters and services to form partnerships in their communities and to know which agencies deal with older women who have experienced abuse, so that they can refer appropriately. ”

Crystal Giesbrecht, Provincial Association of Transition Houses of Saskatchewan

Supporting women who are older can require collaboration with many organizations, professionals, service providers and community members.

Partnerships can be an effective strategy for bringing health services to the transition house, safe house or shelter - connecting women with regular nurse visits, local physicians and pharmacists who offer education sessions. Women who are older may also need to access services from a public trustee or senior's housing. Some women interviewed for this project indicated that their agency had experienced success working in collaboration with adult protection. Others shared frustration. It can be valuable to formalize strategic relationships between the transition house, safe house or shelter and other service providers.

Helping women access pensions, income assistance benefits or other financial support is also important. Oftentimes it takes a long time to secure support. Old Age Security can take up to three months to transfer payments directly to a woman. The forms can be complex and overwhelming. Helping a woman obtain

picture ID, an Indian status card, a Veterans Affairs health card, a senior's bus pass or any other social supports she is entitled to will help her regain control of her life and independence, all of which is key to getting involved in the community in meaningful ways after years of isolation.

Careful collaborative design and emphasis on community partnerships are integral to the practice of Senior's Association of Greater Edmonton (SAGE) in Alberta. SAGE houses about 40 people a year, 75% are women and the average age of SAGE residents is 66. SAGE is active in developing and maintaining relationships with community agencies and service providers, such as nurses, pharmacists and geriatric mental health practitioners. SAGE has developed relationships with multi-cultural health brokers, recognizing the importance of providing culturally appropriate support. In general, service providers are brought into the shelter rather than residents being required to seek outside assistance. Formal contracts are signed with service providers to ensure the longevity of relationships.

“ Older women who return to abusive situations are often those who are not yet able to get Canada Pension Plan or Old Age Security benefits. ”

Bernice Sewell
SAGE, Edmonton, Alberta





Darlene
65 years of age

Darlene lived her entire life free from violence until recently. She was born to a very young woman who gave her up for adoption. Darlene grew up with the family that chose her, not knowing her birth family. Darlene did not have children, so as her family aged and passed away, her loneliness led her to seek out her birth family. She went as an independent woman, with her own money and assets, but quickly became absorbed into the high needs of her birth family. She moved in with her sister and was made to bear the financial burden of the family. They resented her for “getting out”; for having a supportive and healthy family. Darlene’s guilt contributed to her sense of responsibility and duty to provide for her sister, despite the abuse. Darlene’s stay at the shelter was a temporary reprieve from the situation; she returned to her sister’s home, hopefully stronger, more aware and more prepared to attempt to leave again.

8. Provide women who are older with more time to transition

Women who are older may need more time than younger women to find suitable housing and prepare themselves to leave the transition house. Most of the transition house staff who participated in this project indicated that there have been instances where they extended the maximum stay guideline in order to afford a

woman who is older more time at the transition house. The unique needs of women who are older include applying for and securing pensions including pension splitting, addressing health needs and legal issues including property division. As well, some women who are older may not have been on their own for a very long time.

Atira's Ama Transition House in South Surrey, BC, houses women over the age of 55 for up to nine

months - much longer than other shelters across Canada. Atira acknowledges that women who are older may need additional time and support before moving on and into safe, appropriate, affordable housing. As every woman and her situation is different, once an Ama House resident has her stay extended her agreement becomes month-to-month. She is involved in making decisions about best next steps.



Mabel
76 years of age

Mabel lived with her abusive husband for 46 years. The abuse ended only because her husband died. After his death, Mabel moved to a new town where her daughter lived. Her daughter eventually insisted that Mabel could not stay with her; she didn't have time for her mother. Mabel was referred by the hospital to the transition house, as there was nowhere else for her to go.

Her daughter felt that Mabel needed assisted living and got the Public Guardian and Trustee involved. Mabel was declared incapable of looking after her finances. The Public Guardian would not help with housing because they said it was not their mandate. So despite Mabel being homeless, her circumstances were "not their problem". Once housing was found for Mabel, the Public Guardian chose to stay involved; asking Mabel to

have another assessment to determine whether she could live on her own.

It was challenging to find housing for Mabel because she was "too well off" for subsidized housing and "too fit" for assisted living. Furthermore, the town, on the brink of an industry boom, had a severe shortage of subsidized or affordable housing. Transition house staff found housing for Mabel in a senior's residence, after 7 months in the transition house. The Lifestyle Coach at the transition house worked to help Mabel build connections in the community. Mabel is now taking computer courses at the senior's centre.

9. Support women who are older after they leave the transition house



“ We keep the lifeline open indefinitely. We try to keep relationships with women after they leave the house because they often still need support. We call on holidays, wish them well and tell them we love them.

Bea Bonnar, Transition House Coordinator
Dixon Transition House, Vancouver

In a face-to-face facilitated exercise, 11 women from the Promising Practices National Advisory Committee identified key partners including outreach workers, counseling and sexual assault centres, senior's centres, food banks and mental health and addiction services to assist women to transition back to their communities.

As well, First Nations, Métis and Inuit women's experience with daily and persistent racism will mean that transition houses will be called upon to provide specialized services and additional supports for First Nations, Métis and Inuit women to ensure a smooth and sustainable transition into the community. The Native Women's Shelter of Montreal offers these services to address the lack of community services available to First Nations, Métis and Inuit women. The Shelter has found that offering holistic and culturally safe services makes a significant difference in helping First Nations, Métis and Inuit women find stability and move on.

Securing affordable, accessible and safe housing for a woman who is older is also key to future success in the community. It is sometimes difficult to find affordable housing for a woman who is older who wants to live on her own. One-bedroom apartments can be expensive and in high demand. Housing is key to a successful transition.

Volunteering at a transition or safe house or serving on the board of the house, as well as other community opportunities to give back, can secure a woman's new-found independence and relationship with her community.

Coreen 91 years of age

Coreen called a transition house six years ago in fear of a very aggressive neighbour who was on a drinking binge. During intake, Coreen disclosed her dementia and asked for additional support with daily living. Staff reached out to community services and with an adult protection worker developed a safety plan and homecare for Coreen. Although Coreen at times still feels unsafe in her senior's housing complex, she is very happy about her new living arrangements. Coreen calls the transition house for support when she needs it and every other month an outreach worker will meet Coreen for tea, to make sure she is okay.



10. Integrate evaluation into practice, including documentation of use of services by women who are older

Integrating women-centred evaluation into practice will achieve a wide range of goals.

Women-centred evaluation is central to:

- Improving or expanding programs for women, based on evidence;
- Enhancing program materials by including statistics that demonstrate impact;
- Showing trends, over time, substantiated by data and findings;
- Addressing research and statistical gaps related to women and their needs;
- Advocating for funding with policy makers, varying levels of government, and with the private sector;
- Securing funding for programs and services for women; and
- Developing promising practices or best practices for women who are older.

Atira's Ama House, the first transition house in Canada for women who are older, operated for the first three years with no government funding - only a program manager and handful of dedicated volunteers. Atira was eventually successful in securing funding for Ama house by demonstrating need through a long-term, robust evaluation strategy. As well, a number of transition and safe houses have used partnerships with universities to access program evaluation at no cost. For example, SAGE in Edmonton was able to get students to undertake its evaluation as part of their academic requirements.

It is imperative women who are older and fleeing violence and abuse are active participants in any women-centred evaluation, ensuring their voices and experiences are heard, honoured and respected.

A Short Exercise in Women-Centred Research and Evaluation

A *2013 Family Violence in Canada Statistical Profile* provides *some* insight into the nature of violence against seniors, aged 65 and older. This Statistics Canada Profile could reveal so much more; what it reports is:

- Nearly 8,900 seniors were the victims of a violent crime;
- 2,900 seniors were victims of violent crime from family members;
- The rate of "family violence" against senior women was 62.7 women per 100,000, significantly higher than the rate for senior men at 49.7 per 100,000;
- Rates of "family violence" are generally highest among younger seniors and gradually decline with age;
- About 40% of senior victims were abused by their own adult child;
- 28% of senior victims were abused by their spouse, the second most likely family member to be identified as a perpetrator;
- 55% of violence committed against seniors by family members is considered common assault; and
- 85% of incidents of violence committed against seniors involve the use of physical force or threats.

This Statistics Canada Profile is constrained in consideration of gender; reflects the limitations of self-reporting to the police; focuses on physical violence, though not financial or emotional abuse; and the violence reported is within the family, which ignores violence by strangers or friends. Overall, the study provides limited insight into seniors and violence.

A gender inclusive approach to evaluation and data gathering can reveal so much more. If this Statistics Canada Profile had been gender responsive, it could have revealed answers to the following questions:

- How many of the 8,900 seniors who were victims of violent crimes were women and how many were men?
- What were the violent crimes and how did they impact women compared to men?
- Of the 2,900 seniors victimized by family members, how many were women and how many were men?
- Are the abusers male or female adult children?
- What percentage of women as compared to men experienced common assault?
- What percent of women as compared to men were victims of physical force or threats?



11. Work towards system change for women who are older

An overarching goal of the Promising Practices across Canada for Housing Women who are Older and Fleeing Abuse is systemic change, influencing community values and organizational practice and policies. In order to counter the prevailing ageist trend to design policies and programs for young or middle-aged people, we all need to look for opportunities to educate and advocate for inclusive policies and programs that are developed around the needs of all women, including women who are older.

One way to do this is by engaging in dialogue with government to influence policy design and expand eligibility for services. For example, the Director of Operations at SAGE contacted Alberta Works, which administers social assistance, because Alberta Works in developing a policy called “Victim of Family Violence” limited eligibility benefits. The policy was written in such a way that it addressed spousal violence specifically and was not generally being made available to women who were leaving other abusive family dynamics. Ministry staff had not considered the abuse of women by their adult children in the development of the benefits program. After SAGE had assisted five older adults to successfully appeal denial of this benefit, Alberta Works worked with SAGE to expand the program and make it responsive to the needs of women who are older.

Another strategy is for transition and safe houses to initiate and participate in community-based, provincial and national committees and task forces aimed at system change. Promising Practices across Canada for Housing Women who are Older and Fleeing Abuse is an important tool to assist with this advocacy work to expand services country-wide for women who are older. Replicating the success of Atira Women’s Resource Society’s Ama House and other programs serving women who are older, will result in increased safety for women who are older and, ultimately, in much needed system change.

Rose *53 years of age*

Rose was a frequent visitor to Atira’s administration office, often looking for company, food and other practical resources. It wasn’t unusual for her to have visible bruises and cuts on her hands, arms and face. We would ask, but even the gentlest questions would shut her down. She would cast her eyes downward and stop talking. Sometimes when we asked, maybe too assertively, we wouldn’t see her again for days or even weeks.

One morning Rose arrived early. Her arm was in a cast and she had 10 to 12 stiches across her right cheek. She said she’d been cut with a razor blade. We asked if she would tell us who did this to her and as usual she refused. She said she wouldn’t talk to the police. That day though, she accepted shelter and has been living with us, in supported housing, ever since.

Appendices

A. Methodology - How we did this work?

In undertaking this project, it was important to Atira Women's Resource Society that the Promising Practices across Canada for Housing Women who are Older and Fleeing Abuse build on previous progress and connect with other safe and transition houses, as well as with staff offering services for women who are older.

We also embraced innovative ways of collecting, analyzing and presenting findings including:

- 1. Formation of a Planning Committee:** In 2012, a Planning Committee was created to help guide the project's direction. The committee was made up of three researchers and 11 support workers, coordinators and directors from safe and transition housing programs in Canada.
- 2. Preliminary Participatory Evaluation:** In 2012-2013, Nota Bene Consulting Group conducted a creative participatory evaluation of Atira's Ama House in South Surrey, British Columbia and SAVA Centre-Ouest in Montreal, Quebec. Current and past residents and staff and volunteers shared what was working and why, as well as how both programs could improve practices to better meet women's needs. Findings from this evaluation informed the development of the 11 Promising Practices.
- 3. Electronic Survey:** In early 2014, the Canadian Centre for Elder Law was hired to conduct an environmental scan of all the housing organizations in Canada serving women who are older. It identified more than 400 first, second or third stage transition houses and shelters. An electronic survey was developed and sent to the identified transition and safe houses across Canada.
- 4. Formation of a National Advisory Committee:** 11 organizations initially agreed to be active members of the project's National Advisory Committee. The organizations were invited to be a part of the Advisory Committee because they met three criteria: availability, provision of services for women who are older and the need for cross-Canada representation. It was crucial to have representation from urban, rural, large and small cities, francophone organizations, immigrant serving organizations, and on-reserve and off-reserve First Nations, Métis and Inuit housing organizations.

The National Advisory Committee grew to 17 housing and support organizations including:

- Atira Women's Resource Society, Vancouver, British Columbia
- Cambridge Bay Community Wellness Centre, Cambridge Bay, Nunavut
- Dixon Transition Society, Burnaby, British Columbia
- Fort Nelson Aboriginal Friendship Society, Fort Nelson, British Columbia
- Kaushee's Place - Yukon Women's Transition Home, Whitehorse, Yukon Territory
- Liberty Lane Inc., Fredericton, New Brunswick
- Libra House, Happy Valley Goose Bay, Newfoundland
- Maison Simonne-Monet-Chartrand, Chambly, Quebec
- Moose Jaw Women's Transition Association Inc., Moose Jaw, Saskatchewan
- Native Women's Shelter of Montreal, Montreal, Quebec
- North Coast Transition Society, Prince Rupert, British Columbia
- Senior's Association of Greater Edmonton (SAGE), Edmonton, Alberta
- Special Advisor to the Ministry on Domestic Violence, Winnipeg, Manitoba
- Transition House Association of Nova Scotia, Halifax, Nova Scotia
- Violence Against Women, Services Elgin County, St. Thomas, Ontario
- West Coast Legal Education and Action Fund (LEAF), Vancouver, British Columbia
- Yale First Nation, Yale, British Columbia

6. **Collaborative Method:** The Canadian Centre for Elder Law worked with Atira and the National Advisory Committee to collaboratively expand the 2012-2013 Preliminary Participatory Evaluation done by the Nota Bene Consulting Group. 47-semi structured qualitative interviews were conducted with committee members, transition and safe house staff and management, police, health care workers, adult protection workers, auxiliary crisis services and key community partners. Although researchers took the lead in designing the format and composing most of the text, the committee met on numerous occasions through teleconferencing to approve or direct changes to the report. Canadian Centre for Elder Law staff, through this process, wrote a draft Promising Practices report.
7. **In-person Meetings:** Two in-person National Advisory Committee meetings were held in Vancouver, British Columbia. The purpose of these meetings was to collaboratively identify promising practices and build the document. As well, these meetings served to build the community and strengthen the network of housing organizations across Canada that offer services for women who are older. Representatives from women's and senior's organizations in BC were invited to the meetings to participate in discussions about Promising Practices and other issues related to housing women who are older.
8. **Women who are Older and their Stories:** National Advisory Committee members composed stories to reflect the experiences of women who are older for inclusion in Promising Practices across Canada for Housing Women who are Older and Fleeing Abuse. Some stories are true stories though names have been changed, and some are composite stories representing the lives and experiences shared by many women.
9. **Telephone Interviews:** Telephone interviews were conducted between September 2014 and February 2015 with the same list of 410 service providers contacted for the Electronic Survey. The purpose of these interviews was to establish a national inventory of safe and transition housing services for women who are older. The survey findings also informed the 11 Promising Practices.
10. **Literature Review:** A review of material on violence and abuse of women who are older, including best practices and promising approaches from both violence against women and elder abuse perspectives.
11. **Overall Evaluation:** In 2014-2015, Arbor Educational and Clinical Consulting created an in-depth, overall evaluation of the project and the final report. Arbor interviewed key stakeholders and evaluated documentation in order to explore both the Promising Practices processes and impacts, and intended effect.
12. **Editor and Gender Equality Advisor:** In 2015, Caryn Duncan was hired to review the draft Promising Practices report, provide editorial assistance, and advise on gender mainstreaming in Promising Practices across Canada for Housing Women who are Older and Fleeing Abuse.
13. **Translation:** After the documents were finalized, the Promising Practices report and the overall evaluation were translated into French.
14. **Dissemination Strategy:** The goal of dissemination is to ensure the Promising Practices report is received by transition houses, women's shelters and shelters for people who are older, across Canada, as well as by government and other funders. To this end, advisory committee members will distribute through their various networks and contacts. In addition, a press conference or launch will be held in Vancouver by no later than September 18th, 2015. Social media platforms will also be utilized and where appropriate, advisory committee members will present the report and its findings at conferences and meetings.

Recommendations for Further Research

With the conclusion of the Promising Practices project, several areas of practice requiring further research or promising practices have been identified, including inclusive, safe and empowering ways of supporting women who are older:

- Who are living with a disability, chronic disease and or mental health issues;
- Who identify as lesbian, queer, transgender, two-spirited, intersexed; and
- Who are socially or geographically isolated, and require additional outreach.

B. Language used to Develop Promising Practices

Promising Practices National Advisory Committee Members identified the importance of using appropriate language to talk about abuse and violence against women who are older. The following themes emerged regarding use of language:

1. “Violence against women” and not “domestic violence” or “family violence” - The Committee felt that the phrase “violence against women” best honours women who experience violence. When violence against women is reduced to the notion of domestic or family violence, it becomes de-gendered. The woman who is suffering harm is invisible. The Committee chose the expression violence against women because it places women at the centre of the abuse and emphasizes the dynamics of gender and power. It reminds us that violence is something done to women.

Violence against women also characterizes the abuse and violence that women experience in private spaces and as part of the larger reality of oppression of women based on race, immigration, disability, First Nations, Métis and or Inuit identity, and so many other factors. It situates the practice of supporting women surviving violence as part of an international and feminist movement to resist violence against women in all its forms.

2. “Women who are older” instead of “older women” - Women who are older reflects a broader strategy of using person-first language. The age that denotes a woman who is older was left up to the women who were consulted - who shared their personal stories and who shared their experiences serving women who are older. Generally speaking Promising Practices were designed with women in their 50s, 60s, 70s, 80s, and 90s in mind.