Domestic Violence in Later Life

In a telephone survey of nearly 6,000 elderly individuals, victims of elder physical mistreatment reported that 57 percent of perpetrators of physical abuse were partners or spouses (The National Elder Mistreatment Study, 2010). In another study using self-reported information from elders, spouses/partners were described as the most common perpetrators of emotional abuse and physical abuse.

What Is Domestic Violence in Later Life?

Domestic violence in later life occurs when a person uses power and control to inflict physical, sexual, emotional, or financial injury or harm upon an older adult with whom they have an ongoing relationship. The problem occurs in all communities, and affects people of all ethnic, cultural, racial, economic, and religious backgrounds. Although most victims are female, men can be harmed, too.

Generally abusers use a pattern of coercive tactics, such as isolation, threats, intimidation, manipulation, and violence, to gain and maintain power over their victims. Often they tell their victims where they can go, whom they can see, and how they can spend their money — in other words, control their decisions.

What Is the Relationship Between Elder Abuse and Domestic Violence?

Some experts view late life domestic violence as a sub-set of the larger elder abuse problem. Elder abuse, broadly defined, includes physical, sexual and emotional abuse, financial exploitation, neglect and self-neglect, and abandonment. The distinctive context of domestic abuse in later life is the abusive use of power and control by a spouse/partner.

Recognizing that power and control dynamics exist in some elder abuse situations helps frame approaches to addressing violence in later life. Services for domestic violence survivors include crisis intervention, safety planning, advocacy, legal assistance, peer counseling, emergency shelter, cell phone loans, and information for immigrants. Older domestic violence victims face unique obstacles in getting the help and services that they need. A lack of services designed to meet the needs of older victims may leave them with no community resources to rely upon for assistance. Multidisciplinary approaches that unite the aging network, domestic violence programs, law enforcement, prosecutors and health care professionals provide the greatest chance for success in these cases. They provide “no wrong doors” for older abused victims.

Effective interventions that take into account the dynamics of domestic violence in later life focus on safety and breaking isolation. Isolation is a key tactic used by abusers to keep victims from getting help. Breaking that isolation (with tactics such as the Verizon HopeLine collection and distribution of cell phones for victim safety) is a critical intervention. Interventions by family, friends, neighbors, service providers and law enforcement should focus on providing resources and working collaboratively with others in the community. In instances of domestic violence in later life, the primary focus of intervention must be victim safety. Together we can create strategies to end abuse and improve safety, support and services for older victims.

Domestic violence programs are likely to have skills and procedures in place to help many older victims of abuse. On the other hand, the elder abuse network/adult protective services systems/law enforcement have legal responsibility and authorities to protect vulnerable
older adults. The aging network has special skills for assisting victims with diminished decisional capacity or those who are unable to protect themselves from further abuse. They also have access to a number of supportive services for older victims. Efforts should be made to maximize the capacity of all community systems by partnering to meet older victims’ unique needs. Cross referral is crucial to older victim safety.

**Keep in Mind. . .**

Most domestic violence programs were designed for younger women; however, around the country more and more agencies offer specialized services for older women. Most also offer some services and referrals for male victims. The National Domestic Violence Hotline (1-800-799-SAFE) website (www.ndvh.org/) provides a search tool for finding local contact information.

Use the National Eldercare Locator (1-800-677-1116) or visit www.eldercare.gov to identify the AAA (Area Agency on Aging) for your area. The Locator is a national, toll-free telephone referral service connecting callers with state and local agencies on aging and community services.

**Understanding the Victim**

Ending a relationship with an abuser, especially a spouse or partner, is often a difficult process for an older adult. There are many reasons:

- Most victims prefer to maintain some type of relationship with their spouse/partner, who may be their caregiver — *they simply want the abuse to end.*

- Some victims will choose to stay with an abuser, often for *religious, cultural, or financial reasons.* These victims can benefit from support, information, safety planning, and strategies that can help break down their feelings of isolation. *Personal values and beliefs* formed by an individual’s background and experience can also play a role. Some victims may be more willing than others are to report abuse or talk to professionals about family problems. *Race, culture, or ethnicity* may influence body language, eye contact, and the expression of emotion.

- *Generational values* may also be involved. Many older persons may be uncomfortable talking about personal, private matters with strangers. They may fear younger professionals imposing their own generational values about divorce or family roles onto them and judging their decisions.

- Finally, keep in mind that victims of domestic violence in later life may have *tried to get help before without success.* There could be any number of reasons: Maybe a shelter was unavailable or not appropriate for the victim’s needs. Perhaps their abuser was not arrested or a restraining order was not enforced. It could be that the laws did not apply to the situation.

**Here’s How to Help**

| T | Take time to listen. |
| R | Respect the victim’s values and choices. |
| U | Understand how difficult it is. Offer compassion and hope. |
| S | Support the victim’s decisions. |
| T | Tell the victim help is available. Refer victim for support and assistance. |