EXAMINATION OF THE EXTENT OF ELDER ABUSE IN WESTERN AUSTRALIA

A QUALITATIVE AND QUANTITATIVE INVESTIGATION OF EXISTING AGENCY POLICY, SERVICE RESPONSES AND RECORDED DATA

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Joint Initiative with Advocare Inc.

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1 EXECUTIVE SUMMARY

Elder abuse is a significant issue for the Western Australian community, as the population is ageing and the percentage of people over age 65 is increasing exponentially. This research examines the extent of elder abuse in Western Australia, synthesising qualitative and quantitative information from organisations working with elder abuse in order to provide a coherent, consistent estimate of the scope of elder abuse in Western Australia and the capacity of agencies to address this issue. Funding for this research was received through a grant application made by Advocare Inc. to LotteryWest, and researchers from the Crime Research Centre at the University of Western Australia were employed to conduct the research.

Fourteen interviews were conducted with professionals from 10 organisations that respond to elder abuse in Western Australia. These included a total of 26 people, as some wished to be interviewed jointly. Eight of the organisations form part of the Alliance for the Prevention of Elder Abuse: WA (APEA: WA); the other two organisations were the Older Person's Rights Service and the State Administration Tribunal, which also deal with elder abuse cases. Where possible, organisations also provided de-identified quantitative data in order to give insight into the volume and variety of elder abuse that each agency encounters. Two focus groups were also conducted with representatives from a variety of non-APEA: WA agencies that may come across elder abuse in their work; one comprised of three participants, the other of seven.

Data analysis uncovered the following themes and issues:

- There are problems with the definition of elder abuse that require further exploration. Different definitions are used nationally, internationally, and between the different APEA: WA organisations. Some include paid carers and people providing services, e.g. financial advisers. Others are narrowly focused, depending on an agency's service mandate and funding arrangements. The definition of 'elder' is also contested, with different definitions based on different age limits. There are also questions raised about how elder abuse should be perceived and contextualised – should it be seen as a crime? As a private family issue? Also, where does domestic violence end and elder abuse begin?

- Financial abuse was by far the most frequently mentioned type of abuse during the interviews and focus groups and it is also the most common type of abuse recorded in the agencies' quantitative data. Misuse of Enduring Powers of Attorney was the most frequently mentioned financial abuse issue, followed by the perceived responsibilities of Banks to increase protection of vulnerable older people's accounts.

- Qualitative data showed indications of an overall trend for increased volume of cases involving older members of the Western Australian community. However, there was also a consistent degree of uncertainty about the relevance and quality of data provided. There is no uniformity in the way that statistics are gathered; therefore, it is not easy to collate information to gain a picture of what is occurring in relation to elder abuse in Western Australia.

- There does not seem to be a cohesive approach to elder abuse across government and non-government organisations. A strong government department is required to take leadership of this issue and to develop a broad and articulate multi-level elder abuse strategy. There is also a need to develop a better first-level response to elder abuse, perhaps involving a multi-agency team approach. Other options to pressing charges against perpetrators or doing nothing need to be made available to people experiencing elder abuse, e.g. family counselling and mediation.

- Elder abuse lags far behind child abuse and domestic violence in terms of public recognition and social responses. A public education campaign is required to promote the importance of this issue and alert people about older people's rights and assistance available.

A number of recommendations were made to address the issues raised above, and these are listed in the following section.

It has been noted that elder abuse research, policy and practice is about thirty years behind research, policy and practice in child abuse and domestic violence. Due to this fact, it tends to lack conceptual clarity and be poorly defined and measured. While a problematic concept, elder abuse is an issue of deepening concern in our ageing society and the challenge for government and welfare agencies is to ensure that there are adequate resources available to respond to it effectively. It is hoped that the results of this research will inform elder abuse prevention practices for a number of local agencies and allow key agencies working with elder abuse to improve their responses and address perceived gaps in current processes.

2   FINDINGS

2.1   Prevalence and Incidence of Elder Abuse (starting at p.27)

Due to a range of complicated, interactive factors, no single source of data provides a comprehensive window into the nature and extent of elder abuse. Based on a range of international prevalence and incidence estimates for elder abuse victimisation, an average prevalence rate for WA was calculated to be 4.6% (ranging between 3.1% and 6.0%). This translates to an estimate of approximately 12,500 victims of some form of elder abuse in WA for 2011. Combined with population estimates for WA, it is anticipated that the total number of victims over the age of 65 will increase by around 90% over the next twenty years.

2.2   Problematic Issues in the Concept of Elder Abuse (starting at p.36)

- The APEA: WA concept of elder abuse is flawed for a number of reasons:
  1. Different definitions are used nationally, internationally, and between APEA: WA organisations. Some include 'paid' carers and people providing services, e.g. financial advisers. Some are narrowly focused depending on an agency's service mandate and funding arrangements.
  2. Also poorly operationalised are terms such as 'older'/'elder'. Older is either a comparative term with different definitions based on different age limits, while elder is a proper noun carrying respect in Aboriginal communities and culture
  3. What is 'abuse'? When does domestic violence stop and elder abuse start?
  4. Are we fudging crime? Is elder abuse a private family issue or a crime – or both, on occasions? Do we need a separate 'Elder Law' to protect people from elder abuse? Or is this ageist?
  5. Is elder abuse a bland formulation to avoid, deny and minimize challenging realities of crimes of assault, fraud and neglect?
- Increased expectations of life for Australian Over 55's means that they can expect to live for another 30 years – requiring a disaggregated final stage in the life-cycle. One such framework is offered.
- The current APEA: WA definition appears to differentiate between family and friends (informal) and all others in operationalising 'positions of trust'; this appears to be a static definition – open to wide interpretation.

2.3   Key Finding One - Financial Abuse, Enduring Power of Attorney, Banks and Fraud (starting at p.48)

- The issue of financial abuse was the most significant type of elder abuse identified in both the qualitative and the quantitative studies

- A number of concerns were identified about the current arrangements for Enduring Power of Attorney with recommendations about improved community education, and the registration and auditing of existing Enduring Powers of Attorney.

- Support for Australia-wide registration of Enduring Powers of Attorney along with a system of auditing.

- Concerns were also raised about ways of increasing the responsibilities of bank staff in monitoring the transactions in the accounts of older customers to identify accounts vulnerable to possible fraud.

2.4   Qualitative Study – Findings and Analysis (starting at p.59)

- There is a pressing need for an integrated approach across government and non-government organisations, with a government department providing leadership and direction.

- There is sometimes a lack of clarity about the role and power of other agencies and cases fall through the cracks leading to 'pass the parcel'.

- There is a need to develop greater clarity about the network of services – with a clear agency map of services and updated agency information.

- There is a need to establish a flexible and neutral first level response service for initial advice about options - perhaps a multi-agency team approach?

- There is a need to develop agency capacity to assess when to support, advocate or refer to the WA Police

- Annual and varied training for agency staff alongside multi-media community education – with annual updating of education materials (websites, brochures etc)

- Other options to pressing charges or doing nothing should be available to people experiencing elder abuse, eg. family counselling and mediation.

2.5   Quantitative Study – Findings and Analysis (starting at p.70)

- There is no central register of concerns. Barriers to collating information about concerns, such as privacy and confidentiality legislation, need to be addressed.

- There is a need for a central agency data-base system to record reported concerns. In this way, separate information can be collated to build an individual profile of concerns – and an aggregate picture of what is happening in relation to elder abuse in Western Australia.
- Systemic coherency and consistency is required in the way elder abuse statistics are gathered throughout – and across - all organisations.

2.6 Key Finding Two - Towards Leadership (starting at p.85)

- A broad, cohesive elder abuse strategy is needed across government and non-government organisations, with a strong government department providing direction and a leadership role to assist in coordinating responses.
- A community debate is needed to consider changes relating to the evidence-base needed to press charges against perpetrators of elder abuse, so the onus does not have to be on the older person taking action against a family member or a friend.
- There is need for a legislative review to develop more specific Elder Law – in relation to the different types of Elder Abuse.
- The term Elder Abuse is flawed; a suggested alternative concept is Abuse and Mistreatment of Older People.

2.7 Key Finding Three - Voluntary versus Compulsory (starting at p.64)

- There is significant support for greater media coverage and public education about elder abuse – as happened and continues to happen in the child abuse area – as primary level intervention.
- There was discussion about mandatory reporting of elder abuse by practitioners – to lead to counselling intervention and / or reporting to the WA Police as part of secondary and tertiary level responses.
- There are important parallels with past political and policy responses in relation to privileging the privacy of the family in both child protection and domestic violence.
- Community education about elder abuse is needed to address public attitudes of ageism and the privacy of the family in anticipation of enhanced secondary and tertiary level services.

3   RECOMMENDATIONS

The list of the 26 Recommendations developed throughout this report is presented below; there are four headings which cluster the key issues and recommendations and identify their inter-connected nature. The Recommendations are numbered according to the sequence they are made throughout the body of the report, and the page number locates where each Recommendation can be found.

3.1   Review of the Concept of Elder Abuse

Recommendation 1 (p.40)

APEA: WA to lead a community debate to move from the ageist and ambiguous notion of an age definition for elder abuse to one informed by an assessment of capacity for self-care and self-protection.

Recommendation 2 (p.44)

Advocare to seek financial support to convene a national conference in Perth by June 2012 in which visiting international and national speakers focus critical academic and professional attention on the current definition of – and responses to - elder abuse in Western Australia.

Recommendation 3 (p.46)

Advocare to convene a series of community seminars in which senior managers, practitioners and policy-makers from child protection and domestic violence services explore the commonalities and the key differences with elder abuse policy and practice; this could be a major theme of a future National Conference convened by APEA: WA.

Recommendation 4 (p.47)

APEA: WA undertake a review of the current definition of elder abuse informing policy and practice in Western Australia specifically to address the construct of 'positions of trust' and the central issue of 'abuse or crime?'

Recommendation 10 (p.60)

In the light of the reported 'invisibility' of this social issue, Advocare needs to be funded to provide an annual public education campaign of multi-media information (television and newspaper coverage; brochures of agency information and referral information) which is regularly updated.

Recommendation 23 (p.93)

Advocare to explore with the Minister for Seniors and with possible funding sources, including LotteryWest, the advantages of mounting a national conference in Perth by June 2012 to explore the challenges of a more integrated model of primary, secondary and tertiary responses to respond to the needs of vulnerable older people.

3.2   Financial Abuse, Fraud, Enduring Power of Attorney Legislation and the Banks

Recommendation 5 (p.51)

That a representative sample of Centrelink nominee arrangements be subject to a system of auditing each year in order to determine that payments are being used appropriately.

Recommendation 6 (p.53)

That Banks develop policies, practices, educational programs, and regulatory measures that reduce the risk and incidence of financial abuse. These may include better education of vulnerable older people about the potential for financial abuse, an alert system (similar to AUSTRAC) to identify suspicious transactions, as well as better arrangements to ensure the currency of third party signing rights

Recommendation 7 (p.55)

That uniform federal legislation on Enduring Powers of Attorney is developed.

Recommendation 8 (p.55)

That a national system for registering and auditing Enduring Powers of Attorney is implemented, which includes comprehensive education about their useage and limitations for donees and donors.

Recommendation 9 (p.56)

That ways of resolving elder abuse be further investigated and research conducted into the effectiveness of current and alternative methods of resolution.

Recommendation 26 (p.95)

APEA: WA continue to work with the major banks to design and implement an integrated strategy to address the risks of financial abuse and fraud which victimize older people in Western Australia; such work to include an invitation for the network of the major banks to become an active member of APEA: WA.

3.3   Statutory Authority and Responses to Elder Abuse

Recommendation 14 (p.84)

Quantitative data analysis and databases should contribute to the process of identifying vulnerability and risk, and data should be used to drive a risk-assessment process that ensures the most vulnerable are not falling through the gaps. This process should then be used to operationalise resources, across agencies, in the most effective manner to ensure vulnerable people are being best served. Data systems for agencies involved with managing risk for vulnerable sections of the community in WA must develop to better capture relevant information and these developments should be informed by theoretical models that explain variations in risk between individuals and undertaken in consultation with statisticians/researchers.

Recommendation 15 (p.85)

That a lead government agency is identified and given the responsibility to develop and coordinate responses to elder abuse across metropolitan and regional Western Australia – including a review of the concept 'elder abuse' itself, as well as developing agreed referral processes to the WA Police.

Recommendation 21 (p.89)

APEA: WA to explore the establishment of a pilot program involving Advocare, the Health Department of WA, the WA Police and other service-providing agencies to explore the strengths and concerns of the Case Management inter-agency model of family meetings as one response strategy when there are concerns about possible abuse of older people.

Recommendation 22 (p.90)

That APEA: WA consider the way forward in Western Australia to developing an inter-agency investigation and intervention service aimed at protecting vulnerable older people – informed by the case study outlined in the London Borough of Slough Framework.

Recommendation 25 (p.94)

APEA: WA recommends to the State Attorney General that a review of Elder Law is undertaken with specific attention to the law in relation to Enduring Power of Attorney, the Guardianship and Administration Act and the introduction of legislation requiring the registration of wills.

3.4 Towards Integrated Policy and Practice

Recommendation 11 (p.61)

Given the importance of risk and needs-assessments carried out by front-line practitioners involved directly and indirectly in monitoring concerns, Advocare needs to be funded to provide a sector-wide training program to service-provider agencies about types of elder abuse, the network of agencies funded to respond and current research information about needs and risks.

Recommendation 12 (p.62)

There needs to be a review of the current network of service agencies responding to allegations of different types of elder abuse with particular attention to the balance of voluntary and statutory authorities and capacity to intervene in situations of abuse.

Recommendation 13 (p.62)

APEA: WA to seek funding to explore the arguments for and against the design of an inter-agency data-base of reported concerns to build a picture through time of the possible vulnerability of an older person. Confidentiality and privacy issues will need to be addressed but there is a precedence in child protection services.

Recommendation 16 (p.86)

That the development of elder abuse protocols in all agencies instrumental to responding to elder abuse be supported and encouraged in conjunction with interagency protocols to encourage consistent responses.

Recommendation 17 (p.86)

That a comprehensive elder abuse referral and resource guide for service providers and professionals be developed.

Recommendation 18 (p.86)

That elder abuse networks for service providers in both the metropolitan and rural and remote areas of Western Australia be supported and facilitated.

Recommendation 19 (p.87)

APEA: WA to explore the design and implementation of a state-wide inter-agency electronic data register of concerns with the capacity to store, access and weigh evidence of concern and possible risk in a more integrated, aggregated and accessible way.

Recommendation 20 (p.87)

APEA: WA to conduct an audit of family-based practice models in child protection, juvenile justice and domestic violence services which are of relevance to the challenges of inter-agency and inter-disciplinary collaboration in the care and protection of older people, including Family Group Conferencing as early intervention.

Recommendation 24 (p.93)

APEA: WA to coordinate a process by which appropriate needs and risk assessment tools for working with vulnerable older people are identified, reviewed and piloted to agree on a state-wide assessment tool which is fit for the purpose and administered in a professional rather than a technical manner through relationship-building not just information-gathering – as in other risk scenarios of child abuse and domestic violence.

4 BACKGROUND AND CONTEXT

Elder abuse has emerged as a significant social issue in recent years. The abuse of older people was first described in academic journals in the 1970s (Baker 1975, and Burston 1977, both mentioned in Boldy 2002: 4). It has become an issue of growing prominence due to increasing societal awareness of interpersonal violence and abuse of the human rights of vulnerable or minority populations, linked with issues raised by the ageing of the population. Elder abuse was recognized as a problem internationally, with the formation of the International Network for the Prevention of Elder Abuse (INPEA) in 1997, and has been the focus of attention of the UN Department of Economic and Social Affairs Programme on Ageing (UNDESA 2009). An important WHO Report focused on violence and health prominently featured elder abuse and discussed its different emphases around the world (Krug et al 2002).

In Western Australia (WA) a ten member Alliance for the Prevention of Elder Abuse (APEA: WA) exists. APEA: WA includes the following organisations:

- Advocare
- Department of Health WA
- Disability Services Commission
- Legal Aid Western Australia
- Department for Communities: Office for Seniors Interests and Volunteering
- The Mental Health Commission
- Office of the Public Advocate
- Public Trustee
- WA Police
- WALGA (Western Australian Local Government Association)[1]

The Alliance was established in 2005 to promote a whole-of-government policy framework that values and supports the rights of older people. APEA: WA is high-level policy group and members meet collaboratively to raise awareness of issues that surround elder abuse, and to influence current attitudes, policies and practices[2].

Elder abuse is a significant issue for the WA community as the size of the population of people over age 65 is increasing. Current estimates are that this demographic will comprise between 26% and 29% of the total population by the year 2051, up from 12% in 2004 (ABS 2006). Furthermore, the number of elder abuse cases reported to Advocare (the

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[1] At the time the research was conducted, WALGA was not yet part of APEA: WA and so not included in the interviews and data collection.
[2] From http://www.advocare.org.au/information/apea/ (24 February 2011)

WA agency which is funded and mandated to respond to elder abuse) is increasing. Despite this, it remains the case that the extent to which elder abuse is occurring within WA is unclear.

Given the gaps in the current knowledge base, and in view of the likelihood that elder abuse is under-represented in some official data sources, the research aimed to conduct an audit of the key Western Australian agencies that respond to elder abuse. The research incorporated a qualitative component, whereby experienced practitioners within the relevant agencies were interviewed regarding their perceptions of the scope of the issue and in order to identify any strengths and limitations of current intervention strategies, including their operational definitions of elder abuse. The qualitative investigation was complimented by a triangulated analysis of relevant quantitative data held across organisations.

A U.S. National Research Council (2003) report noted that elder abuse is about 30 years behind research in child abuse and domestic violence. Because elder abuse lacks conceptual clarity and is poorly defined and measured, it has been difficult to determine incidence, prevalence, antecedents, and costs (Wilber and Acierno 2008) and achieve a total picture of the problem and how best to respond to it on an individual and societal level. By scoping the size of this issue in WA and the current capacity for existing agencies to make an impact, it is anticipated that the results of this study will inform elder abuse practice across a number of agencies. It is hoped that this research will allow key agencies working with elder abuse to improve their responses to the issue and address percieved gaps in current processes.

5 RESEARCH METHODOLOGY

The objective of this study was to undertake a snap-shot style evaluation of the current service approaches to elder abuse in Western Australia. To achieve this end the study included both qualitative and quantitative components. Three types of data were collected during the research:

- Interviews with knowledgeable, experienced practitioners from each APEA: WA organisation.
- Focus groups composed of service providers from allied organisations that also come into contact with elder abuse issues.
- Relevant quantified, de-identified agency data held across organisations

5.1 APEA: WA Practitioner Interviews

At the outset of the research, our aim was to interview two knowledgeable, experienced practitioners from each APEA: WA organisation individually. These practitioners were to be familiar with their agency's relevant policies and processes to combat elder abuse and were to be asked to provide detail about the organisational framework of these interventions. A letter inviting participation from practitioners in APEA: WA agencies was sent out by Advocare (Appendix 1), along with a letter from UWA Crime Research Centre encouraging interested people to contact the research team (Appendix 2). A copy of the Project Research Information Sheet was attached (Appendix 3).

However, it was not possible to recruit participants from each APEA: WA organisation, for a variety of reasons:

- The Health Department WA was not able to be included as, despite contacting numerous people within the Department, we were not able to identify anyone to interview, and were instead referred on from person to person to no avail (However, we were able to interview two practitioners from Older Adult Mental Health Services, who fall under the aegis of the Health Department, and two professionals working in hospitals participated in the focus groups, so there was some Health Department input, however minor).
- Legal Aid were also not interviewed, as they commented that elder abuse cases were extremely rare and they did not keep statistics by age, so they did not believe that they had anything useful to contribute.

- The Mental Health Commission also did not believe they had anything useful to contribute as they do not deal with cases, and instead referred us to Older Adult Mental Health Services.

Conversely, we did conduct interviews with practitioners from two other organisations which, while not part of APEA: WA, play a large role in the elder abuse arena in Western Australia; these were the Older Person's Rights Service and the State Administrative Tribunal.

From a total of 13 agencies (which included APEA: WA, as represented by the Executive Officer), 10 organisations were able to participate. A total of 14 interviews were conducted, which included 26 people, as some wanted to be interviewed jointly. Each interview was semi-structured and took from approximately 45 minutes to two hours. All interview participants were provided with an information sheet (Appendix 3) and also asked to sign a consent form (Appendix 4), in line with the University of Western Australia's Human Research Ethics Committee Guidelines. Participants were informed that participation was voluntary and they could withdraw from the study at any time without prejudice.

Participants were asked the following questions:

1. What is your role in relation to Elder Abuse in this organisation?
2. Can you give an example of an Elder Abuse case and describe how it was handled by you and your organisation?
3. How do cases of elder abuse come to the attention of your organisation?
4. How does your organisation define Elder Abuse?
5. What is your organisation's procedure when Elder Abuse is referred / reported to you?
6. In what capacity does your organisation assist directly in such cases / indirectly in such cases?
7. Can you give an example of a case that 'fell through the cracks' or was not handled well by your organisation?
8. Do you believe that your organisation has the capacity to respond effectively in cases of Elder Abuse? Why/ why not? What is your evidence for this?
9. What do you believe is the extent of under-reported Elder Abuse within the WA community? On what do you base this opinion?
10. Does your organisation have the capacity to respond effectively to people experiencing Elder Abuse from vulnerable groups such as:
    - Aboriginal and Torres Strait Islander peoples?
    - People from Culturally and Linguistically Diverse backgrounds?
    - People living with physical and / or mental health disabilities?
    - People living in rural and remote areas?

11. What suggestions do you have about ways that your organisation might respond more effectively to Elder Abuse?

12. What suggestions do you have about the ways in which other organisations might respond more effectively to elder abuse?

13. What suggestions do you have about necessary policy / legislative changes to enhance the quality of responses to Elder Abuse in the community?

14. Do you have any other comments about needs and responses to Elder Abuse in the WA community?

5.2   Focus Groups Data

It was also deemed appropriate to hold focus groups with senior, experienced, knowledgeable representatives from a variety of non-APEA: WA agencies which may come across elder abuse in their work.   This was done in order to address comparable issues to those covered in the APEA: WA practitioner interviews. An invitation to participate in the research (Appendix 5) was extended to all Home and Community Care (HACC) and residential aged care service providers, as well as members of the WA Network for the Prevention of Elder Abuse (WANPEA).

Two focus groups were held, one comprised of three participants, the other of seven. Focus group participants came from a range of different organisations: four represented HACC agencies, two were from hospitals, three came from an advocacy agency and one was from an allied health service.

The focus groups were semi-structured, with questions based on those asked during the APEA: WA practitioner interviews. One focus group took 45 minutes; the other 1.5 hours. All focus group participants were provided with a Focus Group Information Sheet (Appendix 6) and also asked to sign a Consent Form (Appendix 4), in line with the University of Western Australia's Human Research Ethics Committee Guidelines. Participants were informed that participation was voluntary and they could withdraw from the study at any time without prejudice.

Focus group participants were asked the following questions:

1. How do you define Elder Abuse?

2. What do you believe is the extent of under-reported Elder Abuse within the WA community? On what do you base this opinion?

3. [What is your role in relation to Elder Abuse?]

4. [How do cases of elder abuse come to the attention of your organisation and what happens when they do?]

5. Do you believe that your organisation has the capacity to respond effectively in cases of Elder Abuse? Why/ why not? What is your evidence for this?

6. Do you have any suggestions about ways in which other organisations might respond more effectively to Elder Abuse?

7. What do you think about the capacity of organisations in WA to respond effectively to people experiencing elder abuse from vulnerable groups such as:

   - Aboriginal and Torres Strait Islander peoples?
   - People from Culturally and Linguistically Diverse backgrounds?
   - People living with physical and / or mental health disabilities?
   - People living in rural and remote areas?

8. Do you have any suggestions about necessary policy / legislative changes to enhance the quality of responses to Elder Abuse in the community?

9. Do you have any other comments about needs and responses to Elder Abuse in the WA community?

5.3 Agency Data

All organisations that participated in the research were also asked to provide de-identified, quantitative data in order to give insight into the volume and variety of elder abuse that each agency is encountering. It was hoped that this would enable longitudinal trends to be examined, capacity issues to be identified, and overall estimates for elder abuse prevalence in Western Australia to be computed.

5.4 Analysis

All interviews and focus groups were transcribed and then analysed for themes and issues pertinent to the research aims. Statistical data provided by the APEA: WA organisations was also subject to appropriate analysis.

5.5 Timeline

The project got off to a slow start due to some necessary organisational processes, and so work was not commenced until April 2010. Interviewing began in mid-May and the last interview was held in early November 2010.

5.6 Limitations of the Research

There are three major limitations of this study:

- The inability to find a way to involve the Health Department of Western Australia in the interview process; the research team was unable to explore the Health dimension of the concerns about abuse of older people.

- The major focus of the interviews was almost entirely on the views of managers working in the Perth Metropolitan area – with implications for regional and remote Western Australia

- The project design required a focus on the views of managers and professional practitioners; the voice of the consumer was not an active component of this study.

5.7   Research Benefits

It is hoped that the results of this research will provide crucial insight into the issue of elder abuse in Western Australia. It is anticipated that this research will (a) provide the best-estimate of the extent to which the various elements of elder abuse is currently occurring, and (b) help identify strengths and weaknesses of current service provision with respect to preventing elder abuse and also for protecting and supporting victims of this crime. This information could be used to inform legislative and best-practice developments into the future.

By scoping the size of this issue and the current capacity for existing agencies to make an impact, it is anticipated that completion of the research will inform elder abuse practice across a number of agencies. The results of this research will allow key agencies working with elder abuse to improve their responses to the issue and address percieved gaps in the current processes.

6 ELDER ABUSE – THE AUSTRALIAN CONTEXT

Until the 1980s, the issue of elder abuse in Australia was largely a hidden problem; attention surfaced after the publication of a number of reports and research projects, which influenced the development of national and State level responses (Kurrle and Naughtin 2008). The first reported reference to elder abuse in Australia was by the Social Welfare Commission in 1975 (Social Welfare Commission 1975, in Kurrle and Naughtin 2008: 110), which mentioned that older people needed protection from exploitation by relatives, friends and the general community. However, elder abuse was not clearly recognized until the 1980s, when it emerged gradually on a State by State basis as it began to be talked about by nurses, geriatricians, social workers, and police who were dealing with such cases (Kurrle and Naughtin 2008).

Major studies around elder abuse were initiated in the late 1980s in Victoria, New South Wales and South Australia (Kurrle and Naughtin 2008). An elder abuse case series was published in the Medical Journal of Australia in 1991 (Kurrle, Sadler and Cameron 1991), and this raised awareness of the issue, particularly in New South Wales. However, elder abuse was recognized as a problem more gradually in Queensland, Western Australia, Tasmania and the Northern Territory (Kurrle and Naughtin 2008). To date, a nationally integrated system has not been developed to address the abuse and mistreatment of older people.

There is no specific legislation in place to address the issue of elder abuse in the community. However, there is compulsory reporting of sexual abuse and serious physical abuse for people living in residential aged care (Kurrle and Naughtin 2008). Also, guardianship legislation, which allows for the appointment of a substitute decision-maker for people without decision-making capacity, may serve to protect the interests of older people who have lost decision-making capacity (Australian Guardianship and Administration Council 2010).

Kurrle and Naughtin (2008) report that over the past 15 years, elder abuse has typically been highlighted by community organisations and followed by collaboration between interested agencies, both government and non-government. This has led to the development of policy, education and information about elder abuse, and often the funding of a non-government agency to provide services to people experiencing elder abuse (Kurrle and Naughtin 2008). The final step will be to integrate strategies to manage, prevent and detect elder abuse into a whole of government approach.

Kurrle and Naughtin (2008) provide an overview of policy responses to elder abuse and neglect in Australia which summarises the initiatives of each State and Territory in

Australia. The management of elder abuse differs from State to State, with inter-agency protocols used in some states, abuse-specific agencies and services in other States, and more informal responses in others. The material about elder abuse policy and practice in Australian States and Territories set out below has been adapted from Kurrle and Naughtin (2008) along with additional information gathered from the relevant government department's publications and those of elder abuse response organisations in each jurisdiction:

6.1   Australian Capital Territory

An Elder Abuse Taskforce convened in 2003, resulting in release of a resource guide *Meeting the Challenge of Elder Mistreatment* (ACT Health 2004). This was developed in order to assist service providers to deal with elder abuse and provide practical guidance and information about referral services. Funding was allocated over four years in the governments 2003-4 budget to develop a program to respond to elder abuse. The program included a telephone information and referral service, a community awareness campaign, development of training materials for professionals and an ACT Elder Abuse Policy Framework. In October 2008, a strategic review was undertaken on the implementation of the ACT Elder Abuse Prevention Program. The recommendations from that review guided the development of the new ACT Elder Abuse Prevention Program Policy (ACT Department of Disability, Housing and Community Services 2010). Following a Strategic Review of the ACT Elder Abuse Prevention Program, a new Program Policy was agreed by Government in April 2010. The Policy outlines approaches for preventing and responding to abuse, roles and responsibilities of key agencies, and reporting requirements. The Department of Disability Services, Housing and Community Services operates an Elder Abuse Information and Referral Phone Line, which provides support, information and referral to services that may assist with abusive situations[3].

6.2   New South Wales

The NSW Taskforce on Abuse of Older People was set up through the Office on Ageing in 1991. They released a report *The Abuse of Older People in Their Homes* (1993, in Kurrle and Naughtin 2008: 116). The concept of a specialist elder abuse response service was discussed in the report, however, NSW has not followed this path. In 1995, the NSW government developed an interagency response to elder abuse called - *Abuse of Older People: An Interagency Protocol* (1995), with its primary focus on ways of responding to elder abuse. This model of response outlines the roles of various agencies with an interest

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[3] http://www.dhcs.act.gov.au/wac/ageing/elder_abuse_prevention__and__assistance (accessed 28 Feb 2011)

in elder abuse. This has been revised into *Interagency Protocol for responding to abuse of older people* (2007) to take into account changes in service delivery and practice. The protocol directs people experiencing elder abuse to contact the local police or Aged Care Assessment Team for assistance.

6.3 Northern Territory

The NT has no specific policy framework for managing elder abuse. Most cases are dealt with by Aged Care Assessment Teams. In rural and remote areas, community workers are trained to recognise high risk situations for abuse and work with the older person's family to improve the care of the older person and put in place strategies to prevent abuse from occurring.

6.4 Queensland

The Elder Abuse Prevention Unit (EAPU)[4] was set up in 1997 to prevent and respond to elder abuse in Queensland. Based in Brisbane, the EAPU also has staff working in three regional centres. The EAPU works to raise awareness about the nature and extent of elder abuse through involvement with community groups and by developing and disseminating resources. It also operates a State-wide confidential telephone helpline which provides information and advice to older people about elder abuse. A Prevention of Elder Abuse Taskforce was established in 2000 to act as a reference group for government and community initiatives. It was active in raising awareness and encouraging implementation of best practice models for responding to abuse. The Seniors Task Force, formed in 2004, has continued to ensure that elder abuse remains on the agenda and has supported Queensland's whole of government approach to elder abuse. In 2006, government funding established the Seniors Legal and Support Services[5], which provide free legal and support services for seniors concerned about elder abuse, mistreatment or financial exploitation.

6.5 South Australia

The Elder Protection Program Committee was established in 1992 and developed a model for responding to abuse, the Elder Protection Program, which began in 1994 with the funding of three specialist positions. This program has been delivered by the Aged Rights Advocacy Service (ARAS)[6] since 1997. ARAS utilizes an advocacy model in dealing with elder abuse, assisting in the individual management of cases of elder abuse once they have

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[4] http://www.eapu.com.au (accessed 28 Feb 2011)
[5] http://www.communityservices.qld.gov.au/seniors/legal-support/ (accessed 28 Feb 2011)
[6] http://www.sa.agedrights.asn.au/history.html (accessed 28 Feb 2011)

been identified. It provides people experiencing elder abuse with information, strategies and options to overcome the abuse and supports them in decision-making. ARAS has developed a website for staff of residential care facilities called *Abuse Prevention: Preventing Abuse of Older People*[7]. The Alliance for the Prevention of Elder Abuse was formed in late 1998 and members are key stakeholders in relation to responding to the abuse and exploitation of older people[8]. The current South Australian government policy on elder abuse is set out in *Improving with Age: our ageing plan for South Australia* (2006) and takes an integrated whole of government approach where elder abuse is considered within a broad range of services. These include information services, regulation of retirement villages and residential aged care facilities, community services and crime prevention.

6.6 Tasmania

There is currently no formal approach to the detection and management of elder abuse in Tasmania. Cases are currently managed by Aged Care Assessment Teams and health or community workers with assistance from advocacy agencies or domestic violence services as necessary. However, in July 2010, the State government allocated $2.6 million over four years to develop an Elder Abuse Prevention Strategy (Tasmanian Government 2010). The strategy will promote a whole of Government approach to elder abuse and focus on community education and support. The funding will also pay for research examining the prevalence of elder abuse in Tasmania in order to make recommendations to Government about the best ways to tackle the problem. A new Office of Seniors' Services is to be established within the Department of Health and Human Services to be a centralised contact point for the elderly and their carers, to provide specialised legal assistance along with financial and money management training. A core component of the Strategy will be legislative review examining the adequacy of existing legislation with a view to improvements being made, as well as the provision of community education about elder abuse.

6.7 Victoria

Victoria has a broader approach to responding to elder abuse than most other jurisdictions. It encourages a generic approach, with all services dealing with older people having the knowledge to identify and manage cases of abuse. Victorian government policy recommends that all agencies that deliver services to older people develop protocols and procedures to deal with elder abuse and neglect. A research report *Strengthening Victoria's Response to Elder Abuse* (Office for Senior Victorians 2005) resulted in $5.9 million of

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[7] http://www.elderabuse.org.au (accessed 28 Feb 2011)
[8] http://www.apea.org.au/background.php (accessed 28 Feb 2011)

funding being made available to implement the recommendations from the report aimed at developing a whole of government response to elder abuse. Part of the funding was allocated to the development of a specialist older person's legal service Seniors Rights Victoria, which was established in April 2008. This service includes a telephone helpline, advocacy and support, legal services and community education. The Department of Human Services has updated its 1995 elder abuse publication by launching *With respect to age –* *2009*: *Victorian Government practice guidelines for health services and community agencies for the prevention of elder abuse* (2009).

6.8 Western Australia

The Western Australian Network for the Prevention of Elder Abuse (WANPEA) was formed in 1999 to encourage collaboration across government and non-government agencies within the health and welfare sectors. Advocare[9], an independent advocacy agency for older people, was funded in 2001 to provide information and assistance to people experiencing elder abuse, as well as referral and community education about the prevention, detection and management of elder abuse. Advocare provides a State-wide service, but is based in the metropolitan area, with an office in Geraldton. The Alliance for the Prevention of Elder Abuse: Western Australia (APEA: WA) was established in 2005 to promote a whole-of-government policy framework that values and supports the rights of older people. APEA: WA is high-level policy group and members work collaboratively to raise awareness of elder abuse issues, and to influence current attitudes, policies and practices in relation to elder abuse[10]. The Older Peoples Rights Service is a specialist legal service that offers legal assistance and social work to those experiencing or at risk of Elder Abuse[11] This is managed in partnership between Advocare and the Northern Suburbs Community Legal Centre, and funded by the Office of Seniors' Interests: Department for Communities.

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[9] http://www.advocare.org.au/ (accessed 28 Feb 2011)
[10] http://www.advocare.org.au/information/apea/ (accessed 28 Feb 2011)
[11] http://www.nsclegal.org.au/services.php (accessed 28 Feb 2011)

7 WESTERN AUSTRALIAN RESPONSES TO ELDER ABUSE

This section discusses responses to elder abuse currently occurring across government and non-government organisations in Western Australia and has been adapted from Black (2008). The following organisations have a mandate to respond to elder abuse in Western Australia – Advocare Inc., the Office of the Public Advocate, and the Older Persons Rights Service. The WA Police also have a role in the investigation of elder abuse as a crime and in protecting vulnerable older people.

7.1 Advocare Inc.[12]

Advocare is an independent advocacy agency which advocates for and protects the rights and best interests of older people living in aged care facilities, receiving community care services, or eligible to receive them. In June 2001 Advocare received funding through the Home and Community Care (HACC) Program to establish an Elder Abuse Prevention Program. This program utilises an advocacy model to provide assistance, information and education to older people who are being abused or who are at risk of abuse by people with whom they have a relationship of implied trust, such as family or friends. The program's advocates work in consultation with the older person, or with their nominated representative.

7.2 Office of the Public Advocate[13]

The Public Advocate is the independent statutory officer appointed under the *Guardianship and Administration Act 1990* to promote and protect the rights, dignity and autonomy of people with decision-making disabilities and to reduce their risk of neglect, exploitation and abuse. The Public Advocate assists in protecting the rights of people who are not able to make reasoned decisions because of dementia, intellectual disability, mental illness, or acquired brain injury. The Office of the Public Advocate is able to investigate any complaint or allegation from the general public that a person with a decision-making disability may be at risk of neglect, exploitation or abuse and may be in need of a guardian or administrator.

7.3 Older Person's Rights Service

The Older Person's Rights Service provides legal advice, information, and legal advocacy as well as short-term counselling and referral to older people who are

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[12] http://www.advocare.org.au/
[13] http://www.publicadvocate.wa.gov.au/

experiencing elder abuse or are at risk of being abused. The service is staffed by solicitors and a part time social worker/advocate who provide legal support for people experiencing elder abuse as well as crisis support related to the legal issue.

7.4 WA Police

The Police hold a broader mandate than the above services, yet are often the first port of call for people experiencing some form of abuse. Many forms of elder abuse are crimes, as outlined in the Alliance for the Prevention of Elder Abuse: Western Australia's *Elder Abuse Protocol* (2006). The Police provide support and protection to people experiencing elder abuse and their families through the application of relevant laws and community intervention. If there is sufficient evidence of a crime being committed it is their policy that charges should be laid and that incidents of violence toward an older person in the domestic setting are treated in the same way that a violent incident in any other circumstances is treated.

7.5 Other Referral Agencies

There are a range of other agencies which are not elder abuse specific, but that are useful to refer people to. Different forms of elder abuse often require different responses and referrals; for example, a situation involving neglect is handled quite differently to one involving financial abuse. It is worth noting that there are a large range of organisations that may be helpful to people experiencing elder abuse, including legal, financial, counselling, advocacy, complaints, health, as well as culturally specific services for Aboriginal people and people from CALD backgrounds. Some deal with broad family violence issues, while others aim to provide help and support to a wider section of the population than just older people. There seems to be a multitude of organisations available for assistance. Nevertheless, it is worth noting that aside from Advocare, the Office of the Public Advocate and the Older Persons Rights Service, the other organisations are not specifically designated to respond to elder abuse.

This may mean that there may be issues about the appropriateness of a referral for some older people. For example, an older person experiencing domestic violence may not feel comfortable in a women's refuge as they are designed primarily for younger women with children. Also, services that do not often encounter older people as clients may not be educated in the nuances of assisting them, for example, taking into account issues such as hearing and visual impairments or lack of mobility. This may make it more difficult for older people to access mainstream services.

Figure 1, below (taken from Black 2008: 11), was developed in order to map the current service responses to elder abuse in Western Australia. The figure includes references to the Aged Care Complaints Investigation Scheme, which investigates allegations of physical and sexual abuse in residential aged care. It must be noted that it is difficult to present a clear referral pathway as elder abuse is often a complex issue and every case is different. Also, the discussion and diagram only references *agency* responses to elder abuse and does not include informal or interpersonal responses.
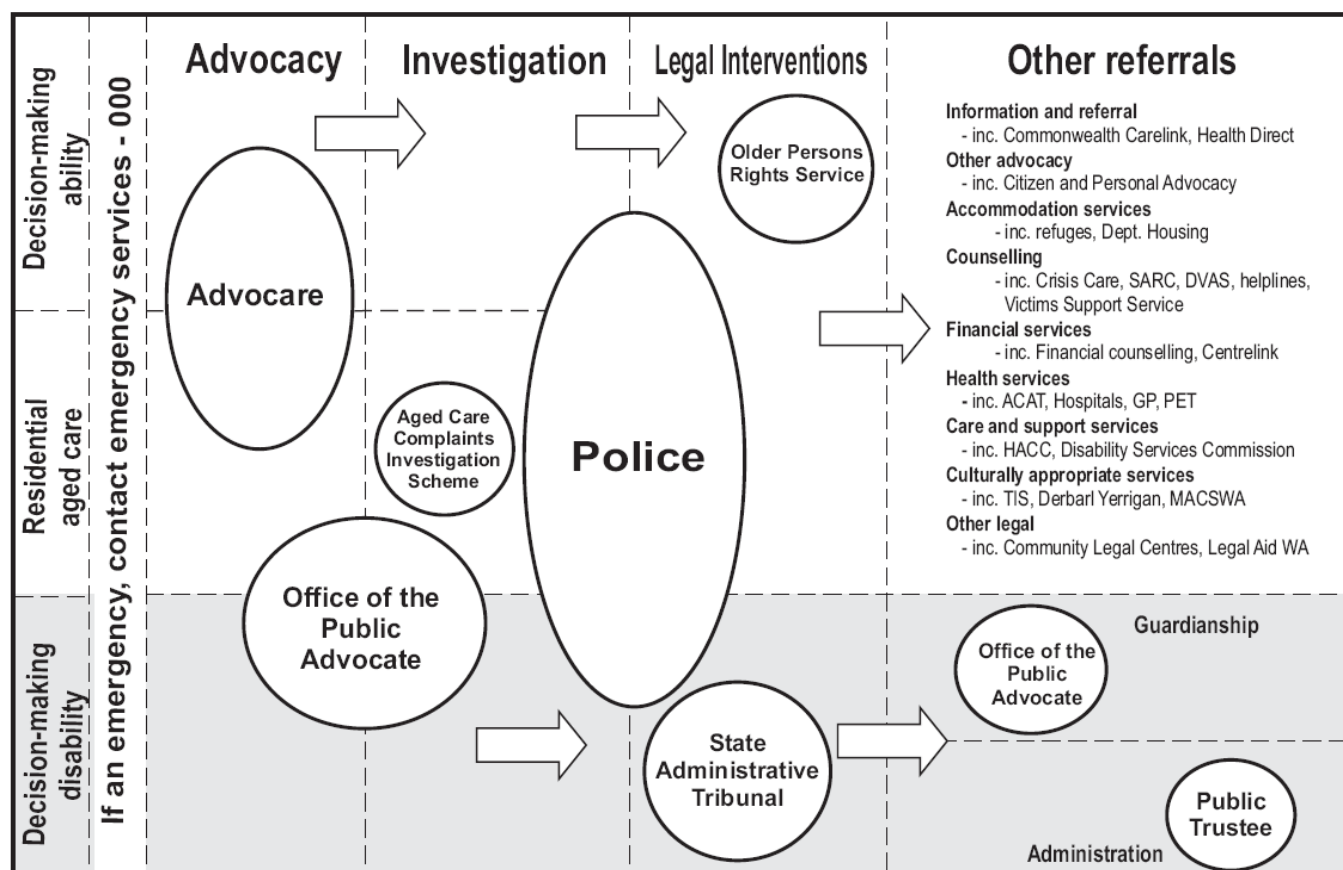
Figure 1 - Elder abuse responses in Western Australia

7.6   Alliance for the Prevention of Elder Abuse: Western Australia[14]

APEA: WA was previously mentioned in the background section of this report (which commences on p.11). Succinctly, it was an initiative of Advocare, the Department of Health and the Western Australian Active Ageing Strategy and brings together key Western Australian organisations that are involved with older people and their family and friends who are experiencing elder abuse in order to:

- Raise community knowledge and understanding of elder abuse

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[14] http://apeawa.advocare.org.au

- Provide policy advice on elder abuse

- Expand the breadth and quality of knowledge of elder abuse

- Support provision of adequate elder abuse prevention and protection services

- Promote professional education and training in elder abuse issues (from APEA: WA 2006).

7.7 Western Australian Network for the Prevention of Elder Abuse

The Western Australian Network for the Prevention of Elder Abuse (WANPEA) is an informal network of service providers and other interested people who meet every two months to exchange information in relation to elder abuse. This network is facilitated through Advocare.

8   PREVALENCE AND INCIDENCE STUDIES OF ELDER ABUSE – INTERNATIONAL, NATIONAL AND LOCAL

8.1   Elder Abuse Prevalence

Accurate prevalence data is problematic because of differences in definitions, methodologies and the level of openness/denial in the sample groups from study to study; therefore, it is difficult to interpret reported prevalence rates (McDonald and Collins 2000). These vary from 1% to 4% in Australia, Norway, the US and Canada, to 20% in France (McDonald and Collins 2000). However, several incidence and prevalence studies have been recently completed using standard case definitions and, in some cases, scientifically acceptable research methods (Lachs and Pillemer 2004). There are two major types of study approach designed to identify prevalence, according to Boldy et al (2002), a methodology that examines elder abuse cases per agency, and approaches which attempt to survey a population of older people.

Due to a range of complicated, interactive factors, no single source of data provides a comprehensive window into the nature and extent of elder abuse. In the previous research conducted, sample surveys of the population seem to yield higher estimates (2.7% – 8.9%) than the case per agency approach, as contacting older people directly, e.g. via in person or telephone interviews, seems to result in higher estimates of elder abuse prevalence (Boldy et al 2002).

8.2   International Comparisons: Recent Published Data

A recent systematic review of the prevalence of elder abuse and neglect was undertaken by Cooper, Selwood, and Livingston (2008). The researchers conducted a comprehensive literature search of multiple databases up to October 2006, supplemented by a search of the references of all relevant articles. Forty-nine studies met inclusion criteria, however, only seven of these used measures for which reliability and validity had been addressed. The review concluded that more than 6% of the general older population, and one in four vulnerable older people dependent on others for their care, are at risk of abuse and that only a small proportion of this is currently detected (Cooper et al 2008).

> *A known issue associated with the quantification of elder abuse is an absence of valid, reliable measures [for elder abuse] as well as consensus on what constitutes an adequate standard for validity of abuse measures (Cooper et al 2008: 159).*

8.3   Canada

An equivalent pattern of results has been published for elder abuse in Canada, with survey-based prevalence estimates of 4% based on a design that involved interviewing 2,008 randomly selected seniors (O'Keeffe et al 2007: 79, discussing Podnieks 1990). More recently, the Canadian General Social Survey (1999) indicated an estimated 7% of elderly: "have suffered some form of abuse by an adult child, caregiver or spouse during a 5-year period" (Canadian Resource Centre for Victims of Crime 2006: 2). In attempting to extrapolate these prevalence estimates, Braun (2009: 3) suggests that, "The number of abused seniors in Canada could be as low as 53,500 or as high as 249,500 individuals."

8.4   United Kingdom

One year prevalence estimates (as taken from O'Keeffe et al. 2007) for the UK overall – any mistreatment at 4.0% and any abuse excluding neglect at 2.8%. The respective breakdowns across member countries are:

- England: any mistreatment – 3.9%, and any abuse excluding neglect – 2.7%.
- Wales: any mistreatment – 6.0%, and any abuse excluding neglect – 4.8%.
- Scotland: any mistreatment – 4.3%, and any abuse excluding neglect – 2.7%.
- Northern Ireland: any mistreatment – 3.0%, and any abuse excluding neglect – 2.0%.

O'Keeffe et al.(2007: 5) concluded that,

These are likely to be an under-estimate because of the conservative definitions used to measure mistreatment, and the absence of people in the survey with severe dementia or living in residential care.

8.5   United States

The *National Center on Elder Abuse* Fact Sheet (2005) further discusses the issues associated with quantifying elder abuse, including: (a) definitional inconsistencies, (b) the covert nature of the problem, (c) absence of a uniform reporting system within the US, and (d) a dearth of comprehensive national data. With this caveat in mind, the Fact Sheet then lists a range of the best available estimates of the prevalence of elder abuse in North America, including:

- An estimated prevalence in the US of between 2% and 10%, with variations stemming from sampling, survey methodology, and definitions (Lachs and Pillemer 2004).
- An estimated incidence in the US during 1996 of 450,000 examples of abuse and/or neglect in domestic settings involving adult victims aged 60 and over (National Elder Abuse Incidence Study 1998).

These estimates were consistent with the survey-based prevalence estimates for elder abuse (financial, physical, and sexual combined) in Boston, MA of 3.2% (O'Keeffe et al 2007: 79, discussing Pillemer and Finkelhor 1998), and also the findings reported by Thomas' (2000) summary of:

> *...three significant American studies that reported estimates of elder abuse and neglect ranging from 1.2% to 5.6% for all older adults (Braun 2009:3).*

8.6 Australia

To give some perspective on the local relevance of this issue, information displayed on the Australian Institute of Criminology website (last updated September 18, 2009) suggests that between 2011 and 2031, the percentage of Australia's population aged 65 years and over will increase from 12% to almost 25%. With respect to attempts to quantify the extent to which elder abuse is occurring in Australia, Kinnear and Graycar (1999:1) estimated that:

> *...about 4.6% of older people [in Australia] are victims of physical, sexual or financial abuse, perpetrated mostly by family members and those who are in a duty of care relationship with the victims.*

However, the same problems that have already been discussed from overseas also plague the measurement of and response to this issue within Australia:

> *There are no reliable national statistics to confirm the size of the problem. There is no mandatory reporting. No policy framework for investigating complaint. Not even an agreed definition of what constitutes elder abuse (AgedCareCrisis.com, February 10, 2008)*

8.7 Western Australia

Based on data available on the Planning Western Australia website (www.planning.wa.gov.au), Table 1 uses these prevalence estimates from research undertaken in other areas to estimate: (a) the current size of the elder abuse problem in WA, and (b) the potential size of the problem into the future if victimisation rates remain constant and the size of the at-risk population continues to grow. This average victimisation prevalence suggests there are about 12,500 victims of elder abuse in Western Australia in 2011 (with a lower limit of approximately 8,500 and an upper threshold of nearly 16,500). According to these population figures and assuming that there is no change in the relative frequency of abuse, the quantity of victims would increase to an estimated number of about 24,000 over the next 20 years: this would represent nearly a 90% increase in the absolute number of victims estimated for 2011. The summary point of these estimates is that, given the expected increase in the demographic expected to be over the age of 65, without systematic intervention Western Australia can expect the size of the elder abuse problem to almost double in the next two decades.

Table 1. Estimated elder abuse victimisation prevalence for Western Australia between 2011 and 2031, and estimated percentage increases in number of victims relative to 2011

		2011	2016	2021	2026	2031
WA Population (65+)		273,796	340,600	375,460	463,870	519,340
Abuse prevalence estimate	(avg. = 4.6%)	12,473	15,516	17,104	21,132	23,659
	(low = 3.1%)	8,609	10,710	11,806	14,586	16,330
	(high = 6.0%)	16,336	20,322	22,402	27,678	30,987
Percentage increase from 2011	(avg. = 4.6%)		24.4%	37.1%	69.4%	89.7%

9   ELDER ABUSE – REVIEW OF WESTERN AUSTRALIAN STUDIES

Elder abuse is a significant issue for the Western Australian (WA) community as the size of the older population is increasing. Current estimates are that people aged 65+ will comprise between 26% and 29% of the total WA population by the year 2051, up from 12% in 2004 (ABS 2006). The number of people aged 85 years and older is also expected to increase substantially, from 1% in 2004 to between 6% and 8%. Figures from the latest census show that the Western Australian population is ageing at a rate faster than the overall population is increasing (The Public Advocate of Western Australia 2007). Furthermore, the number of elder abuse cases reported to Advocare (the WA agency which is funded and mandated to respond to elder abuse) is increasing (Advocare Inc. 2010). Despite this, the extent to which elder abuse is occurring within the WA community remains unclear.

A relatively recent Western Australian study estimated the prevalence of elder abuse among people aged 60 years and above to be 0.58% (Boldy et al 2002). However, prevalence is difficult to establish given that taboos about this issue are likely to result in under-reporting. A substantial minority of respondents in the above research (22%) believed that the real figure may be as high as 15% or more, if unreported cases are Included. In recent years, five research studies of elder abuse have been conducted by WA organisations:

9.1   Elder Abuse in Western Australia (Boldy et al 2002)

The Office for Seniors Interests and Carers commissioned Curtin University's Freemasons Centre for Research into Aged Care Services to conduct research in order to establish baseline data about the prevalence of elder abuse in Western Australia. 1,017 organisations in Western Australia identified as potentially having contact with older people (defined as people 60+ years) were surveyed by mail questionnaire. A sample of 129 GPs were also surveyed. The study explored the extent of elder abuse by type and provided information regarding aspects such as the relationship of the abuser to the older person being abused, risk factors and desirable interventions, as well as knowledge and use of relevant protocols. Among other recommendations, the research recommended that specific attention be focused on people from culturally and linguistically diverse (CALD) backgrounds and Aboriginal and Torres Strait Islander communities.

9.2 Advocare's Speak Out Survey – "S.O.S" on Elder Abuse (Faye and Sellick 2003)

This survey was conducted in 2002 by Advocare. The research involved a week-long, anonymous State-wide elder abuse telephone survey. It aimed to explore elder abuse and gathering empirical evidence about it in Western Australia. Ninety-nine cases of elder abuse were reported, with 87 falling clearly within the definitions of elder abuse adopted by the research. The study provided details and description of the experiences of people who had experienced elder abuse or witnessed it being perpetrated on other people.

9.3 Mistreatment of Older People in Aboriginal Communities (OPA 2005)

In 2005, the Office of the Public Advocate commissioned research to identify and develop local responses to the mistreatment, abuse and neglect of older people in Aboriginal communities. This research was prompted by the findings of the Boldy et al (2002) study, which indicated that relatively high levels of abuse were reported in Aboriginal communities. The Boldy et al (2002) research was not designed to specifically explore elder abuse in Aboriginal communities in a culturally-sensitive and appropriate manner, and so recommended that further investigation and discussion was required to take into account Aboriginal people's lifestyles, worldview and cultural obligations. The Office of the Public Advocate's (2005) research found that the impact of abuse and mistreatment was felt earlier among Aboriginal people, where the mortality age was lower and an older person was often considered to be someone in their forties. It was found that mistreatment and neglect of older people does exist in Aboriginal communities and is a major concern that affects many families.

9.4 Elder Abuse in Culturally and Linguistically Diverse Communities (OPA 2006)

In 2006, the Office of the Public Advocate commissioned research to examine elder abuse in culturally and linguistically diverse (CALD) communities. As with the above research, this project was prompted by a recommendation of the Boldy et al (2002) study. More than two hundred CALD seniors and more than thirty organisations working with CALD seniors were consulted during this project. The research indicated that some CALD seniors are at greater risk of elder abuse due to poor English skills, social isolation and dependency on family members, unwillingness to disclose abuse because of social stigma, and cross-generational factors resulting in differing expectations of care and support. The research

concluded that there is significant under-reporting for this group, and this requires further exploration.

9.5 The Human Rights of Older People and Agency Responses to Elder Abuse (Black 2008)

This project explored agency responses to elder abuse in Western Australia in order to identify gaps and duplications in the field. It also aimed to lay the foundations for the development of a whole of sector rights-based model for responding to elder abuse. Three focus groups and seven interviews were conducted in order to collect qualitative data about responses to elder abuse in Western Australia. These involved 23 service providers who had interest in and expertise with elder abuse issues. Qualitative data was collected about responses to elder abuse in WA, and there was a specific focus on issues for Aboriginal and Torres Strait Islander people and people from CALD backgrounds. Current service responses to elder abuse in WA were mapped and documented. The research highlighted service gaps identified by the study participants and no service duplications were identified.

9.6 WA Research: Summary of Findings

Broadly speaking, the above research about incidence of elder abuse found the following:

1. Financial abuse is the most commonly reported form of elder abuse (comprising 81% of known cases reported in Boldy et al (2002), and 74% of cases in Faye and Sellick (2003)). Financial abuse was also the most commonly reported type of abuse in Indigenous and CALD communities (OPA 2005; OPA 2006).
2. It is common that older people experience multiple types of abuse at the same time, with 84% of people experiencing financial abuse in the Advocare study also experiencing psychological abuse (Faye and Sellick 2003).
3. Advocare's Speak Out Survey found that the vast majority of people experiencing elder abuse lived in their own homes (90%), and in 31% of cases the alleged perpetrator lived in the older person's home, with a third of these receiving carers' payment (Faye and Sellick 2003). In only three cases did the older person live in the alleged perpetrator's home, and in 6% of cases the older person was living in residential aged care.
4. In both Boldy et al (2002) and Faye and Sellick (2003), the main perpetrators of abuse were adult children (43% and 56% respectively).
5. It was also found that people from what are perceived as disadvantaged or vulnerable groups were over-represented in the elder abuse statistics of these studies:

- **Decision making disability** - People with some form of decision-making disability were more likely to be subject to abuse, representing 75% of reported elder abuse cases (Boldy et al 2002).

- **Women** – Females were more likely to experience elder abuse than males (Boldy et al 2002), at a rate two and a half times higher than the rate for men. In the Faye and Sellick (2003) study, women comprised 74% of elder abuse victims.

- **Older aged** – Boldy et al (2002) found that people aged 75 years or older were more likely to experience abuse.

- **Indigenous and CALD people** - Although the two studies conducted by the Office of the Public Advocate into elder abuse in Indigenous and CALD communities (OPA 2005; OPA 2006) did not collect prevalence data, they concluded that there is evidence to suggest that elder abuse exists in these communities at similar levels than in the mainstream population and that there may be a higher risk for these people due to certain factors, including their experiences with law enforcement as well as language and cultural barriers.

9.7   Summary of Service Gaps Identified in Black (2008)

- There is a lack of protection services for people with decision-making ability where an older person with decision-making capacity is experiencing elder abuse, but does not want to take any action about it.

- A lack of specialist counselling, legal, and support services for people experiencing elder abuse was also identified.

- There are gaps relating to abuse experienced by people in residential aged care, with financial abuse the most common form of elder abuse witnessed in residential aged care; this is not covered by the Federal elder abuse compulsory reporting legislation.

- Abuse by paid carers lies outside the definitions of elder abuse currently adopted by Western Australian organisations responding to elder abuse, so responses may be lacking in this area.

- There is a perceived gap in relation to assessment of decision-making capacity of the person experiencing elder abuse due to a lack of specialist knowledge for workers in the field.

- Specific service gaps were identified in relation to elder abuse and people from CALD backgrounds - with a need for culturally specific community education about elder abuse and bilingual counselling services for older people.

- Gaps were identified for Aboriginal people including the need for a culturally appropriate refuge, a culturally specific residential aged care facility in the Perth metropolitan area,

and a 'one-stop-shop' support service for young and old Aboriginal people. It was also seen as important to develop culturally-specific community education and information about abuse and mistreatment for older Aboriginal people, their carers, service providers and the younger generation.

9.8   Summary: Broader Effects of Elder Abuse

Being a victim of elder abuse may have a devastating effect on a person's lifestyle and quality of life. For example, suffering financial abuse may mean that a person who was previously comfortably off may now be impoverished. The experience of elder abuse may also have an effect on the older person's health and well-being due to the emotions experienced as a result of the betrayal by loved ones. Elder abuse has been associated with many forms of psychological distress and increased mortality in its victims (Lachs et al 1998; Comjiis et al 1998; Wolf 2000).

Lachs et al (1998) conducted a study of 2,812 older people in one US city where data from an annual health survey were compared against reports of elder abuse to a local adult agency over a nine year period. Mortality rates of non-abused and abused were tracked. Thirteen years after the initiation of the study 40% of the non-abused people were still alive while only 9% of the abused elders were still living. The researchers speculate that mistreatment causes extreme interpersonal stress that may confer an additional death risk. Even when elder abuse does not result in imminent physical harm, research has shown it has a detrimental effect on mortality and causes severe emotional distress (Wolf 1997).

10 PROBLEMATIC ISSUES IN THE CONCEPT OF ELDER ABUSE

In this review of national and international literature on the concept of 'Elder Abuse', a number of current definitions will be presented and located against Donnison and Chapman's (1967) seminal framework for reflecting on any case study of social policy:

- The **Manifest** level – the formal and official version outlined in legislation and policy documents (the **expected is** and the **ought** of the policy)
- The **Assumed** level – the perceptions of individuals involved in the legal, policy and practice processes at different places in the network of roles and responsibilities (likely to reveal both perceptions of the gaps between the declared and the actuality of policy and practice and likely inter-professional and inter-agency **conflict** and **role-strain**)
- The **Extant** level – the views of the observer invited to become an insider through consultancy or evaluation research to develop judgements about the previous two levels (the view of the **consultant or researcher outsider** who becomes a partial and temporary insider)
- The **Requisite** level – the recommended way forward following the processes of enquiry and review (could be part of the **new manifest** version)

The current definitions will be reviewed critically against the framework above – to raise a number of intellectual and moral concerns:

1. To what extent is elder abuse a flawed concept – with the use of problematic and poorly operationalised terms including 'elder, 'abuse', and 'trust relationship' influencing the quality of current policy and practice?
2. Whether 'elder abuse' is a bland formulation to avoid, deny, or minimise the challenging realities of the experiences of many elderly people who are victims of the crimes of assault, fraud and neglect – often from within their own families?
3. To what extent does the current Western Australian political, legislative and human services system have the capacity to advise, intervene, lead and monitor services to protect the vulnerable elderly?
4. What lessons about services of care and control in the privacy of family life of elderly people can be learned from the development of human services, legal and medical practice models from the 1960s case study of Child Protection and the 1980's case study of Domestic Violence?

10.1 Defining Elder Abuse

Elder abuse is a difficult subject to broach with people; it is a private issue occurring within interpersonal relationships. There is often discomfort with and denial of the problem as well as a culture of secrecy that exists in relation to it (WHO/INPEA 2002; OPA 2006). However, in saying that, it is more diplomatic and also culturally sensitive to use the term 'abuse and mistreatment of older people', it is also much longer and clumsier. Therefore, in the interests of brevity, the term 'elder abuse' is used throughout this report. Nevertheless, there are difficulties with this terminology and these must be into account in appropriate situations. – raising the broader challenges of cross-cultural assumptions and needs/service access.

There are varying definitions of elder abuse, but the APEA: WA and the WHO/INPEA definitions are presented and critiqued below:

> *Elder abuse is defined as any act occurring within an informal relationship of trust, which causes harm to an older person, where the person responsible for the abuse is a family member, friend or any person of trust (APEA: WA 2006: 3).*

> *Elder Abuse…A single or repeated act or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person (WHO/INPEA 2002: 3).*

However, elder abuse is a problematic concept and there are several different ways of defining it. Some definitions include abuse by institutions and paid carers (McDonald and Collins 2000; UNESCO 2002), while others include self-neglect as an elder abuse category. Also, there are several issues outlined below that must be considered in relation to defining elder abuse and its scope.

The most commonly adopted categories of abuse include:

- *Financial or material abuse*: which includes the illegal or improper use of a person's finances or property.
- *Emotional or psychological abuse:* inflicting mental anguish through actions or words that cause fear of violence, isolation or deprivation, and/or feelings of shame, indignity and powerlessness.
- *Physical abuse:* inflicting physical pain or injury or physical coercion.
- *Sexual abuse:* incorporates a broad range of unwanted sexual behaviour, including rape, indecent assault, sexual harassment and sexual interference. Also includes such practices as inappropriate administration of enemata or cleansing of the genital area.
- *Social abuse:* the forced isolation of an older person – limiting or preventing access to grand-children, other relatives, friends and services, etc. Sometimes it may have the additional effect of hiding abuse from outside scrutiny.

- ***Neglect:*** the failure to provide the necessities of life to an older person for whom one is responsible (APEA: WA 2006: 6-10).

10.2 Problematic Issue One: Older / Elder?

The ways in which we conceptualise 'elder' must be considered. Is it an age range, a relationship status within the family and community, a measure of frailty or vulnerability? Also, how may abuse and mistreatment be defined objectively? Some forms of abuse are easily apparent, for example, bruising as a result of physical abuse, but others, such as psychological abuse, can remain invisible to others.

Usage of the term 'elder abuse' may also be problematic. Some older people find it too confronting or simplistic and feel more comfortable if it is referred to as 'abuse and mistreatment of older people' (Office of Ageing 2004). This is the case also for many Aboriginal people, as some find the use of the word 'elder' offensive in this context as it is commonly used as a term of respect for their community leaders. Concern has also been expressed that the term 'elder abuse' disguises the prolonged nature and on-going effects of life-long violence (VCCAV 2005).

The concept, 'older'/'elder' surfaced initially as problematic during the process of securing Ethics Approval for this project through the UWA Human Research Ethics Committee when a question emerged about whether this project would focus specifically on abuse of elders in Aboriginal communities.

'Older' is a comparative term, while 'elder' is either a proper noun or a synonym for older. According to the recent publication by the Office of the Public Advocate and the Queensland Law Society (2010: 2), the term 'elder' is not defined at common law and has no legal meaning. Such ambiguity enhances a risk of developing and maintaining a single and ageist stereotype amongst the 'elderly', their families and friends, and amongst the professional community that works with them (Clare 1992).

Current ways to operationalise these two concepts include:

- The age of 'retirement' of men aged 65 years and of women aged 60 years
- The age of access to a government pension
- The age of access to superannuation
- The age of access to a state government Senior's Card when no longer working full-time and aged 60 years
- The age of 50 years or younger for older Aboriginal people

Salt (2010) identifies the current formulation of eight stages in the life-cycle before arriving at number nine, the final inclusive stage covering 30 years of life, the Over-55's; he

points to Infancy: Toddlers; Pre-School; Primary School; Secondary School; Young Adulthood/Young Parents between 20 and 30 years; Household Formation between late 20's and late 30's and Mature Family from 40's to 54 years. Salt then seeks to disaggregate the single stage of Over 55's given their expectation of life over their next 30 years; Salt proposes four stages from 55 years onwards:

- *Portfolio Lifestyle* from 55 to 64 years - currently 2.5 million Australians with an expected increase of 18% by 2020; this stage involves pre-retirement transitions to part-time and consultancy work.
- *Active Retirement* from 65 to 74 years - currently 1.6 million Australians with an expected increase of 47% by 2020; this stage includes a focus on wellness (clubs, spirituality and volunteering), travel and connecting with grand-children.
- *Going Solo* from 75 to 84 years - currently 994,000 with an expected increase of 33% by 2020: this stage involves living in a single person household, with a smaller personal network and greater reliance on family and community support.
- *Frail* from 85 onwards - currently 401,000 with an expected increase to 547,000 by 2020; this stage involves a greater likelihood of being alone and reliant on family and institutional support.

While this formulation of at least four stages in the life-cycle after the age of 55 years does disaggregate the simplistic ageist stereotype, there could be a temptation to focus care and protection policy and practice on those over the age of 85 years. An informed needs and risk assessment tool would focus the front-line professional on the key issues when thinking about age, vulnerability and risk of types of abuse includes an informed appreciation of:

- The older person's capacity for self-care and sound decision-making.
- The quality, capacity and integrity of their personal community of family, friends and neighbours.
- Their visibility and active participation in public activities.

To focus the minds of politicians, policy-makers, human services professionals – and the West Australian community – it is sobering to look at predictions of the growth trajectory in the numbers of Australians over the age of 70 years by 2030 – and the implications for demand on services including monitoring their safety. Stammer (2011) reflects on a recent publication by the Productivity Commission to provide the following table about the changing demography of the Australian population:

Table 2. Relative percentage (and absolute numbers) of the Australian population by age category for 2010 with estimates projected to 2050

Age group		2010	2020	2030	2040	2050
0-64 years	Millions	19.2	21.5	23.6	25.6	27.7
	%	86.5	83.6	80.7	78.7	77.4
70/84 years	Millions	2.1	3	4.1	5.3	6.2
	%	9.4	11.5	14.2	16.2	17.4
85 plus	Millions	0.4	0.5	0.8	1.3	1.8
	%	1.6	2.1	2.8	4.1	5.1

As Table 2 demonstrates, currently, there are 2.5 million Australians aged 70 or over (11%); by 2030, the number is predicted to almost double to 4.9 million (17%). Clearly, maintaining reliance on the construct of chronological age will be arbitrary and even more problematic when seeking to identify those vulnerable to potential and actual abuse and neglect. There is work to be done to re-frame the concept of 'older' for a variety of reasons including the self-esteem of older people and the design and funding of a continuum of necessary services for their care and protection.

The emerging concept of **Vulnerable Adult** in the UK legislation (Fitzgerald et al 2009: 97) means:

> *...a person aged 16 or over whose ability to protect himself from violence, abuse or neglect is significantly impaired through physical or mental disability or illness, through old age or otherwise.*

There is a pressing need for a comprehensive review of the current age-based definition of older/elder to move towards a working definition which can lead to the identification of those vulnerable to the various types of abuse and neglect listed above; the evidence of the anticipated increase in the numbers of older Australians over the age of 70 years highlights the critical nature of this review.

RECOMMENDATION 1

APEA: WA to lead a community debate to move from the ageist and ambiguous notion of an age definition for elder abuse to one informed by an assessment of capacity for self-care and self-protection.

10.3 Problematic Issue Two: Elder Abuse or Crime?

Dixon et al (2010: 404) highlight the complexities of defining and intervening in situations of elder abuse:

> *Abuse may consist of a single act or repeated acts. It may be physical, verbal or psychological; it may be an act of neglect or an omission to act or it may occur when a vulnerable person is persuaded to enter into a financial or sexual transaction to which he or she has not consented or cannot consent. Abuse can occur in any relationship and may result in significant harm to or exploitation of, the person subjected to it.*

Unfortunately, some vulnerable older people experience more than one type of abuse – and some incidents of abuse are extremely damaging to their physical and emotional health – and to their bank-balances.

Given that a significant amount of the known abuse of older people occurs in the context of their personal communities of family and friends, there are challenges to the identification and response to financial, physical, sexual and verbal abuse and neglect of older people. There are obvious parallels with community, political and professional responses to child abuse and domestic violence which also occur in the privacy of 'the family'. Sacco (1993: 73) writes helpfully on the problematic of definition and response:

> *The literature on elder abuse lacks any standardised, non-arbitrary procedure by which the at-risk population may be identified.*

Sacco goes on to identify the challenges facing professional workers who are responding to the ambiguity of the degree and frequency of some types of abuse, the family culture of abuse throughout the life-cycle, the reasons for tolerance by the victim of the abuse and the intention of the abuser. Sacco argues that the abusive behaviour identified in much elder abuse is already covered by existing laws and is a crime, for example fraud and assault. Kinnear and Graycar (1999: 1) assert:

> *We, need to discuss whether, because of a person's age, we are comfortable about redefining criminal acts (assault, sexual assault and theft) as 'abuse'.*

Fitzgerald et al (2009) differentiate between abuses by a stranger (e.g. mugging or email fraud) and those carried out by people in a position of trust, including members of the family, friends and neighbours and paid practitioners (direct care staff, health professionals, social workers, accountants, financial and legal advisors) – and a later Section (p.46) will address the complex issue of Positions of Trust. They argue that the focus in a comprehensive needs and risk assessment and response to elder abuse must be on the person experiencing the actual or potential abuse – not on the actual or likely perpetrator; they reflect on three key concepts:

- *Abuse* – an illegal, improper or harmful practice
- *Harm* – an act that causes physical, mental or moral impairment or deterioration
- *Crime* – an action prohibited by law or a failure to act as required by law

The authors go on to ask four key questions – namely:

1. Are there situations when financial abuse is not a crime (theft or fraud)?

2. Are there situations when sexual abuse is not a crime (forced sexual contact or harassment)?

3. Are there situations when physical abuse is not a crime (violence or bodily harm)?

4. Are there situations when psychological abuse is not a crime (mental or emotional anguish by threat, humiliation or other verbal or non-verbal conduct)?

Fitzgerald et al (2009: 101) conclude:

> *Regardless of the causes of these four types of abuse or, indeed, the intention of the perpetrator, it is difficult to argue that crimes have not been committed.*

Finally, Brown and Skinner (2010) offers a comprehensive diagram of *'Types of Abuse' and Levels of Investigation* which is located as Figure 2; Brown (2009) writes in helpful detail about the vulnerability of older citizens to types of abuse from crimes by strangers through to abuse by family and friends, family conflicts and ending with institutional abuse. Brown offers a framework to policy-makers and practitioners in Western Australia which differentiates between:

- *Predatory Crime* – fraud, burglary and exploitation
- *Hate Crimes* – abuse in public places by strangers
- *Parasitic Crime* – moving in without invitation and taking food and money
- *Breach of Professional Roles and Responsibilities*
- *Family Conflict* – including domestic violence, financial abuse, carer stress and neglect
- *Institutional Abuse* – including rigid care regimes, staff culture issues and cruel individuals

Brown (2009: 305) reflects on the complexity of professional decision-making and effective intervention in this context:

> *The reality is often something more messy that happens in, and under the influence of, competing relationships and expectations and where decisions are often taken in a force field that can include deception, oppression, undermining or violence.*

This is a complex moral issue for the Western Australian community to consider – and one which is of interest to older people, their families and the network of professionals who work in the various aged care services. The current elder abuse system privileges a rights-based response by professionals responding to the potential or actual victim of abuse which can serve to avoid, deny or minimise their experiences. There is an emerging view that argues for a more statutory-based response to some or all of these victims.

'Types of Abuse' and Levels of Investigation

Abuse in Service Settings
(Level 1 or 4)

Abuse in your own Home
(Level 2 or 3)

Crimes in the Community
(Level 3)

Institutional Abuse

1. Rigid inflexible regimes

2. Inadequate or restrictive
   - Policies
   - Procedures
   - Training
   - Supervision

3. Staff out of depth
   - Unmotivated
   - Overwhelmed

4. Cruel individuals not screened out, supervised or addressed

5. Abuse by other service users not managed

Family Conflict

1. Domestic Violence

2. Financial Abuse

3. Carer Stress

4. Over or under protective parents

5. Neglect

6. All may be exacerbated by inequalities within and between families and/or social exclusion

Hate Crime
- Physical Abuse
- Harassment or Discrimination
- Exclusion from public spaces

Predatory Crime
- Rogue trader
- Distraction Burglary
- Sexual abuse and exploitation
- Financial abuse, extortion or fraud

Parasitic Crime
- Moving in to a person's accommodation
- Using their space or possessions without permission
- Using or living off their benefits, pension or food

Breach of Professional Roles and Responsibilities

- o Unethical or unauthorized practices by:-
- o 'powerful staff' (arrogant)
- o 'resentful staff' (hard-done-by)

Isolation or Exclusion, incuding racism and homophobia
- May increase opportunities for abuse to occur and reduce opportunities for detection

With thanks to Professor Hillary Brown

NB: Sexual Abuse may occur within any of these contexts but may have a different aetiology in each
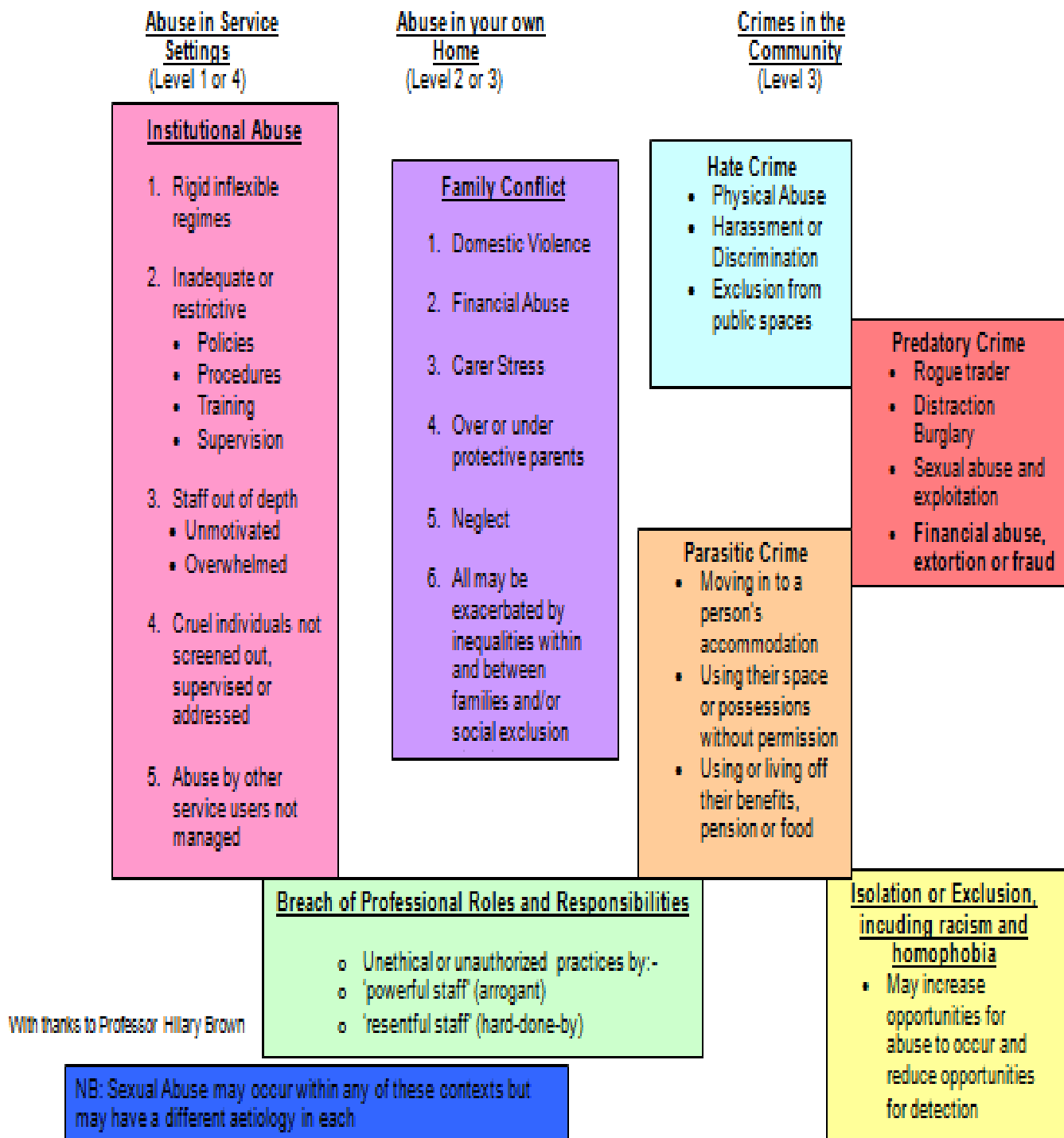
Figure 2 – 'Types of Abuse' and Levels of Investigation

> **RECOMMENDATION 2**
>
> Advocare to seek financial support to convene a national conference in Perth by June 2012 in which visiting international and national speakers focus critical academic and professional attention on the current definition of – and responses to - elder abuse in Western Australia.

10.4 Problematic Issue Three: Family and Abuse and/ or Crime?

Financial and psychological abuse are generally the most commonly reported types of abuse (Cripps 2001; Faye and Sellick 2003), and typically more than one type of abuse is experienced at a time (Boldy et al 2002; Faye and Sellick 2003). The effects of abuse may culminate when multiple types of abuse are being perpetrated (UNESCO 2002). Abuse often takes the form of a process rather than a specific event (Faye and Sellick 2003). James and Graycar (2000) comment that elder abuse is usually part of an established pattern of behaviours rather than a single event in isolation when a family or duty of care relationship exists.

As outlined earlier, elder abuse is a multi-faceted construct involving intentional and unintentional actions of both a passive and an active nature. Much abuse takes place in the context of family relationships – whether carer or friend assault, neglect, violence or financial abuse. Given the growing impermanence of the contemporary 'family' and the complexities of 'blended family' cultures, professional workers will need an appreciative enquiry stance of openness and flexibility when gathering information informing a professional assessment of the structure and quality of 'family' relationships (Clare 2000).

There are challenges to professionals whose role and responsibilities include making a needs-assessment and a risk-assessment of an elderly person reliant on family care. When reflecting on the slow emergence of public awareness of child abuse in their families and in foster care and residential care since the 1960's focus on 'baby-battering' and 'non-accidental injury', it would seem highly likely that there is a parallel under-reporting of elder abuse in 2011. Reasons for under-reporting include:

- A sense of shame – and fear of retaliation by the family member.
- A fear of the alternative to family care – namely social isolation and/or a move to a residential care home.
- Wanting the abuse to stop but not involving police and the courts.
- An absence of systematic recording and reporting of concerns (as in child protection) across the health and human services sector.

- Growing isolation and dependency of the older person.
- Quality of family assessment tools available to practitioners.
- Practitioner ambivalence about the authority and control aspects of statutory intervention – beyond providing services of care and support.

Penhale (1993) identifies some similarities between child abuse and elder abuse – including the risk of violence and harm to the victim; abuse of a dependent person usually by a family member; the dependent person may well be a source of stress (emotional, physical and financial) with abuse often as a desperate response to an intolerable situation. However, Penhale goes on to identify important differences between child abuse and elder abuse – including:

- Elder abuse remains a hidden social condition because of a lack of cultural precedent (recent increased expectation of life and the emergence of four generational 'families').
- Children are viewed as vulnerable and becoming less dependent whereas there is more pessimism and discrimination about elderly people (Thompson 1998).
- There is a political and an institutional awareness and response to child abuse since the emergence of community concerns following the death of Maria Colwell in England in the early 1970's.
- Older people have more legal, economic and emotional independence than do children – including the capacity to refuse intervention by Police and other services.
- But – many victims of elder abuse are mentally or physically frail, socially isolated and it is difficult to monitor their well-being; they also present a likely worse future set of challenges for their carers.

Given the likely invisibility and under-reporting of elder abuse, there is a strong argument for State-wide training programs for professional workers whose responsibilities include needs and risk-assessment of vulnerable elderly people. As with the development of domestic violence programs, there are skills in assessing family cultures given the possibility of:

- Brown's (2009) focus on Family Conflict, Parasitic Crime and Predatory Crime.
- The possibility of an inter-generational family culture of abuse and neglect (Clare 1992; Kinnear and Graycar 1999) in which current concerns could be a continuation of previous domestic violence or an opportunity for a reversal of a victim and perpetrator relationship.
- The need to recognise signs of cautious ambivalence when meeting someone who might be experiencing abuse within the family including remaining quiet or silenced in family meetings; displays of repressed anger by carers (criticism, insults etc); conflicting

accounts of incidents and accidents; growing evidence of isolation from others (Action on Elder Abuse 2011).

There could be important policy and practice lessons about services of care and control in the privacy of family life of elderly people to be learned from the development of human services, legal and medical practice models from the 1960's case study of Child Protection and the 1980's case study of Domestic Violence.

RECOMMENDATION 3

Advocare convene a series of community seminars in which senior managers, practitioners and policy-makers from child protection and domestic violence services explore the commonalities and the key differences with elder abuse policy and practice; this could be a major theme of a future National Conference convened by APEA: WA.

10.5 Problematic Issue Four: Relationships of Trust

Dixon et al (2010) reflect on a UK study of over 2000 people over 65 years and their perceptions of relationships of trust; the focus of the study was on the expectations of family members, paid care staff and close friends. As might be expected when reflecting on simple and complex role relationships and the likely professional development process from novice towards confidence and competence, respondents had difficulties with the binary nature of relationship categories embedded with an expectation of trust:

> *The assumption that the identified relationship categories imply an expectation of trust did not always reflect older people's experiences (Dixon et al 2010: 409).*

The researchers in this study also had difficulties in categorising partners or close friends; acquaintances or 'close family'; neighbours as next door or nearby. Given the likelihood of 'family of choice' decisions and fluidity in affective relationships (Clare 2000), there are important distinctions to be drawn between:

- The achievement and maintenance of trust in affective relationships, and
- The idea and ideal of a position of trust.

Dixon et al (2010: 412) assert:

> *The key principle in these cases of the legal definition of a 'position of trust', which refers to anyone who has a duty of care towards another person, which includes not only professional carers but also family members, neighbours, friends and others who provide protection, care or support for another.*

The APEA: WA definition of elder abuse refers to abuse by people "within an informal position of trust"; is this an idealized view in aged care policy by which a simple binary

construct is used to differentiate between family and friends (informal) and all others (formal)? The definition is static and open to interpretation. Relationships between providers of whatever services and their clients/ consumers can change over time – with the possible development of degrees of trust.

RECOMMENDATION 4

APEA: WA undertake a review of the current definition of elder abuse informing policy and practice in Western Australia specifically to address the construct of 'positions of trust' and the central issue of 'abuse or crime'.

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11 FINANCIAL ABUSE, ENDURING POWER OF ATTORNEY, BANKS AND FRAUD

Although the research did not explore different types of abuse, the issue of financial abuse was by far the most frequently mentioned during interviews and in the case studies discussed by research participants. Due to the focus on this issue, it was deemed appropriate to devote a chapter of the report to the key issue of financial elder abuse. However, as the data in relation to this topic was also relevant to other issues highlighted in the research, segments of it have been touched upon in the previous section – Problematic Issues, and are also repeated later in the report in the Implications and Recommendations section. This chapter discusses financial abuse in the context of both national and international literature and uses quotes from the research interviews in order to better illustrate these issues.

11.1 Background

Financial abuse is defined as *"The illegal or improper exploitation or use of funds or other resources of the older person"* (Wolf et al 2002). However, current definitions are very basic and do not distinguish between financial exploitation committed with intent, or that committed through careless behaviour or ignorance on the part of the person charged with looking after an older person's financial interests. Also, fraud and theft by people not in a relationship of trust to the older person are not usually considered to be financial elder abuse, and are rather considered as criminal activity (Lowndes et al 2009). The simplistic nature of this definition of financial elder abuse complicates attempts to address it; given there is no clear agreement about what constitutes financial elder abuse then it is difficult to determine the extent of the problem (Lowndes et al 2009). There are differences between financial abuse that is deliberate, for example, theft and fraud, and inadvertent mismanagement of a person's funds. These differences make it difficult to operationalise the definition of financial abuse (Lowndes et al 2009)

Financial abuse is one of the largest reported types of elder abuse (Boldy et al 2002; Kemp and Mosqueda 2005; Wainer et al 2010). Depending on the definition used, it has been proposed that between 0.5% and 5% of older Australians have experienced financial elder abuse, and these figures are similar to those recorded overseas (Lowndes et al 2009).

Financial abuse has emerged as a national and international issue as the result of a number of factors including:

- An increase in the ageing population.

- A projected increase in the number of people with dementia.

- Age-related distribution of assets - the wealth held by older Australians is currently estimated as 22% of the total wealth - and is projected to increase to 47% by 2030 (Kelly and Harding 2003).

- The asset boom has made home-owning generations wealthier, while housing affordability issues have made home ownership less achievable for younger generations. This may result in the belief by adult children and grandchildren that the assets of older relatives should be regarded as 'family' assets.

- The high representation of alleged financial abuse in elder abuse cases against a background of concerns about underreporting (adapted from BFSO Bulletin 2007: 2).

It is relatively common for family members and friends to assist older people in managing their finances and assets. Such assistance may include both formal and informal means, such as operating an Enduring Power of Attorney, arrangements with Banks or Centrelink, signing blank cheques, and using automatic teller machine pin numbers. A national representative survey of 3,434 people concerning the prevalence of asset management for older people indicated that about one third of respondents had assisted a family member or friend with asset management in the past 12 months (Tilse et al 2003). The study also found that the majority of the assistance was informal, with only 15.4% of assistance involving use of an Enduring Power of Attorney (Tilse 2007, in Wainer et al 2010).

Four common ways of perpetrating financial abuse are through misuse of family agreements, Centrelink nominee[15] arrangements, banking authorities, and Enduring Powers of Attorney (or EPAs). One research participant commented:

> A Centrelink nominee [arrangement] is the easiest [way of misappropriating funds], then the banking authority, and then the Enduring Power of Attorney (Interview Eleven).

Misuse of an EPA was by far the most commonly mentioned, while family agreements, although they emerged as an issue in the House of Representatives Standing Committee on Legal and Constitutional Affairs Inquiry into Older People and the Law (2007), were not mentioned at all by research participants. The responsibilities of Banks and ways in which they could increase protection of vulnerable older people's accounts were also frequently mentioned, and Centrelink nominee arrangements were touched on two of the interviews.

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[15] A Centrelink nominee is a person authorised to act on behalf of a Centrelink customer when dealing with Centrelink and this person can also be authorised to receive their Centrelink payments.

These four issues are discussed in this chapter. As family agreements were not a subject of discussion in the interview process, these are only briefly touched on. Centrelink nominee arrangements were only mentioned briefly, and so are only briefly discussed. The bulk of the chapter devoted to EPAs and Banks, as these were by far the most frequently mentioned issues. As well as providing some background about financial elder abuse, this chapter will also discuss the suggestions of research participants concerning policy and legislative reform around these issues.

11.2 Family Agreements

Family agreements have featured strongly as a financial elder abuse issue (Johnson 2010). These are typically defined as arrangements made between older people and their relatives (usually adult children) or carers that involve sharing property, building granny-flats, or large sums of money being loaned or gifted by the older person (Johnson 2010). The intent is that the older person acquires some future care, a life interest or co-ownership of the granny-flat or other shared accommodation (Johnson 2010). Concurrently, the relative or carer receives their inheritance early or gets a start in the housing market, and these arrangements are attractive as families can assist in supporting each other by living together.

There are risks involved in this process, as these family agreements are often informal with only vague and verbal terms, and many are made without legal advice (Johnson 2010). If there is a breakdown in the relationship in the future, or circumstances change, the older person may become severely disadvantaged financially. In the worst case scenario, older people have lost their life savings or family home and had little recourse to recover the money or property (Johnson 2010). In cases of property, the civil jurisdiction for litigation is the Supreme Court. In pursuing any legal action here, the associated legal costs are so high as to virtually exclude anyone other than a company or extremely wealthy individual from seeking redress through this system (Johnson 2010).

As family agreements were only touched on lightly in one interview, there are no recommendations made in relation to them.

11.3 Centrelink Nominee Arrangements

A Centrelink nominee is a person or organisation authorised manage a Centrelink recipient's payments[16]. Technically, the nominee is only supposed to use the money to pay for things the recipient needs, and Centrelink can ask the nominee to show records of how

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[16] Information from http://pulse.centrelink.gov.au/someone-to-deal-with-centrelink-for-you/ (accessed 28 March 2011)

they spent this money. However, this is not done in any systematic way and, as it was mentioned earlier, this arrangement is open to abuse. During the House of Representatives Inquiry into Older People and the Law (2007), the Committee received a number of concerns about the potential for financial abuse by people holding nominee authority on behalf of Centrelink clients. The Committee made recommendation that Centrelink examine a sample of nominee arrangements each year to determine that payments are being used appropriately.

RECOMMENDATION 5

That a representative sample of Centrelink nominee arrangements be subject to a system of auditing each year in order to determine that payments are being used appropriately.

11.4 Banks

It has been proposed that there may be a role for banking and financial sector employees to identify suspicious situations or transactions. People working in this industry may be in a position to identify potential elder abuse if they are educated about it and sensitive to the issues involved. Anecdotal evidence from service providers trying to assist people experiencing financial abuse has been that responses by banking staff are highly variable. While some are helpful in providing information to ascertain whether or not abuse is actually occurring, others will not give the account-holder information about their own finances in order that they can confirm that suspicious withdrawals have taken place (APEA: WA 2007).

During the interview process, there was frequent discussion around the responsibilities of Banks in monitoring money that may be going out of people's accounts, with participants commenting that Banks are at the front line and therefore more likely to notice unusual transactions, so they should have a greater role and responsibility in reporting them:

> *Can the banks fall into some responsibility? There's this person who has got $100,000 in the bank, they know how old they are. You would think, anyway, that if suddenly that $100,000 is taken out in large chunks or dwindled away over a period of time with a number of withdrawals been taken out [banks would notice] (Interview Twelve).*

However, the difficulty noted with this was that Banks have a high staff turnover in relation to front-counter workers, so it is not easy to keep up with education about EPAs and elder abuse. Research participants mentioned that in their dealings with Banks in regard to financial abuse, it was best to raise concerns with someone more senior in the bank.

Suggestions were made that perhaps Banks could set up a policy in regard to monitoring, so that they could report suspicious transactions to the appropriate authorities:

> *Whether banks need to set up…a sort of policy in regard to monitoring, or do they hand it over to a similar body, like AUSTRAC[17], who have access to all accounts and everything that goes through the system…and again they have analysts who can readily say, "Oh well no, that's been happening" or they can say, "Well this looks a bit suspicious" and then they can report it to the appropriate authority (Interview Twelve).*

It was noted that credit cards are more heavily monitored, as Banks have liabilities in this matter as they may have to replace the money if it is later found that a transaction was fraudulent, and participants commented that Banks do not have the same liabilities in respect to people's personal transaction accounts.

One research participant noted that there are tighter bank controls in the UK. They reported that when care staff had to have dealings with their client's Banks along with other bank processes, they were required to present a letter from the agency involved to the bank along with a photo of the care worker, and this could cause problems if more than one carer was involved with the client:

> *When we used to have to do that in the UK it was…getting the letter, the photograph, the agency badge, and going through a rigmarole of processes to actually get that money out. A signed letter wouldn't be good enough. It would need to have the agency they're employed for, the letter with a photo of the care worker, and this and this and this, and then obviously the...you know it yourself, a lot of the issues are with the same consistency of the same care worker going back again and again, and that doesn't always exist, you know? (Focus Group One).*

The Banking and Financial Services Ombudsman produced a Bulletin 'Financial Abuse of the Vulnerable Older Person' (BFSO 2007) in the wake of the House of Representatives Inquiry into Older People and the Law report (2007). The Bulletin provides information about financial abuse and how to identify it, and places the information in the context of the interaction between Banks and other financial institutions and their older customers (BFSO 2007). It comments, however, that financial institution staff are in an unenviable position, as:

> *In disputes we see arising from alleged financial abuse, a common claim is that the bank and its staff should have recognised that exploitation was taking place and could have taken steps to prevent loss. Whether potential exploitation was visible at the time and what could and should have been done are always the difficult issues (BFSO 2007: 3).*

Given this, the challenge for Banks is to develop policies, practices, educational programs and regulatory measures that reduce the risk and incidence of financial abuse (BFSO 2007).

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[17] AUSTRAC is Australia's anti-money laundering and counter-terrorism financing regulator and specialist financial intelligence unit (http://www.austrac.gov.au/).

> **RECOMMENDATION 6**
>
> That Banks develop policies, practices, educational programs, and regulatory measures that reduce the risk and incidence of financial abuse. These may include better education of vulnerable older people about the potential for financial abuse, an alert system (similar to AUSTRAC) to identify suspicious transactions, as well as better arrangements to ensure the currency of third party signing rights.

11.5 Enduring Powers of Attorney

A subject frequently mentioned during the interviews and focus groups was Enduring Powers of Attorney, or EPAs. Of the thirteen case studies discussed during the interviews, ten involved examples of financial abuse, with six of these involving misuse of an EPA. Below are several quotes provided during the interview process describing this:

> *An elderly gentleman…was financially abused by his daughter. He had given her the Enduring Power of Attorney. She decided that it was an immediate piggy bank for her and she had a holiday, and she bought a new car, and meanwhile, Dad's account was going lower, lower, lower (Interview One).*
>
> *The mother believes that the daughter didn't have an EPA, but however, there was an EPA done some sixteen years ago, and the elderly lady couldn't even remember the solicitor. She remembers going to one; she remembers where it was, but the name is woolly, and said that she did, on his advice, make out an EPA and added all of her children jointly, but of course, I haven't got documents. I don't know if it was jointly and severally. However, I'm taking it as the client says – that the house was sold by forging…the old lady's signature. The money was certainly transferred into the old lady's bank account, but slowly this particular daughter has whittled it away. She's got $178 left in an account that should have had close to $300,000 (Interview Five).*
>
> *She signed and Enduring Power of Attorney in that lady's favour, and it wasn't long before the lady's husband and her children actually moved in…into her house, and helped her as well. Well, the husband actually helped himself to about $80,000 out of the person's bank account… (Interview Ten).*

An Enduring Power of Attorney is a document which allows an adult with decision-making capacity[18] (the donor) to give a trusted person or agency (the donee) the right to make financial or property decisions on their behalf (Johnson 2010). The donor must choose whether the attorney, or donee, is able to act immediately, or only in the event that the donor loses legal capacity. Each State and Territory in Australia has different laws and regulations concerning EPAs and there is not a nationally consistent approach to the assessment of mental capacity (Johnson 2010).

It was commented that EPAs are very open to abuse:

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[18] Capacity refers to the ability of a person to make reasonable judgments. This may be affected by mental health issues or dementia and in borderline cases capacity may have to be assessed by a qualified professional, such as a Psychogeriatrician.

> *Enduring Powers of Attorney…[are] instruments that are very powerful and can be used quite indiscriminately, really, by people if they want to steal or otherwise take money away from people without anybody else necessarily picking that up (Interview Eleven).*

Investigation into the misuse of an EPA may be made by the Public Trustee, if the donor is the subject of an Administration Order Application and the Public Trustee is directed by the State Administrative Tribunal to do so. The police may also get involved, if the matter has been reported to them. However, this means that the detection of misuse of an EPA is reliant on someone coming forward to report the abuse.   One organisation that participated in the interviews described the way in which these cases may come to their attention:

> *One very familiar scenario would be "My sister is my mother/father's attorney under an Enduring Power of Attorney and they're selling her home and I don't think it's right. I think she doesn't want it sold" and whatever. We scratch the surface of all of that and what often comes to light is that there's sibling rivalry, misunderstanding about the authorities that are given in an Enduring Power of Attorney and/or that someone is abusing their power, so there can be all sorts of allegations about abuse, but whether they're in fact correct is another thing (Interview Four).*

There is no formal registration process for EPAs, and this, coupled with the familial nature of many EPAs means that the likelihood of adequate monitoring is questionable (Johnson 2010). In a submission to the Department of the Attorney General in Western Australia, the Northern Suburbs Community Legal Centre proposes that the ad hoc nature of the reporting of EPA abuses is 'highly inadequate', and that:

> *…a nationally consistent approach is needed to bring Australian law up to date with the ever increasing complexity of financial issues in our society (Johnson 2010: 8).*

A large number of research participants proposed a need to put in place a system for registering and auditing EPAs. While they are useful in assisting older people to manage their finances, they are often criticized as lacking accountability, transparency and safeguards to ensure that their misuse is prevented (Johnson 2010). The Victorian Parliament Law Reform Committee's report of their Inquiry into Powers of Attorney (2010) made a total of 90 recommendations around Power of Attorney. Of most relevance to the policy and legislative reform suggestions made by participants in the current research were several recommendations around the development a register for powers of attorney and how this would be managed (Recommendations 66 – 78). While the Committee did not recommend a system of auditing be put in place, they did make recommendation that the donor of the power of attorney be able to appoint a 'personal monitor' to oversee the operation of the EPA (VPLC 2010).

The House of Representatives Inquiry into Older People and the Law (2007) also made several recommendations related to Enduring Powers of Attorney. Most relevant to this research was Recommendation 20, which proposes the development of a national register of EPAs and considers such aspects as using this register to assess the activities of

a sample of attorneys. This recommendation has been partially accepted, and the government response document reports that the Standing Committee of Attorneys-General will be encouraged to consider a review of a potential national register of EPAs in the context of developing uniform legislation on powers of attorney (House of Representatives Standing Committee on Legal and Constitutional Affairs 2009).

Current there is different legislation in each State and Territory. Therefore, the scheme would need to be national and happen at a federal level. There would also be a considerable cost involved in establishing such a system, as in all probability a new department would need to be formed and have forensic accounting to make sure the attorney is not misappropriating money. However, it must be noted that such a complex system may cause potential attorneys to decline the responsibility if the reporting requirements are too stringent and burdensome.

RECOMMENDATION 7

> That uniform federal legislation on Enduring Powers of Attorney is developed.

RECOMMENDATION 8

> That a national system for registering and auditing Enduring Powers of Attorney is implemented, which includes comprehensive education about their useage and limitations for donees and donors.

11.6 Other Issues

Several other issues related to financial abuse came to light during the research. One was that, although financial abuse is a crime, it often goes unreported due to the fact that the older person is not willing to press charges against a family member:

> *We've gone out to see a client with representatives of OPA and what had happened is the represented person had given her bank card to her daughter who then her son accessed it, so he took about $80,000 out of the account before anyone knew about it and mum was living in a house in [suburb] or something. I think she had enough money, and, while she's got diminished capacity, she was quite adamant that she didn't want us to pursue it any further, you know, "This is my grandson you're talking about here. I would have given my money to [my] daughter if she had asked for it" so we didn't pursue it and I don't think it was ever paid back, from memory (Interview Ten).*

This is a relatively common finding (Heisler 2000; Cripps et al 2002) and is touched on in the previous 'Problematic Issues' section. It has been suggested that most older people who experience elder abuse chose not to seek help in resolving it (Cripps et al 2002).

This may be due to fear of retribution or placement in a nursing home, and feelings of protectiveness towards the perpetrator.

RECOMMENDATION 9

That ways of resolving elder abuse be further investigated and research conducted into the effectiveness of current and alternative methods of resolution.

Another issue raised that there are different degrees of financial abuse – some involving relatively small amounts, which, although significant for the person involved, may not be high on the priority list of the police and fraud squad:

> *I've had a few direct contacts with the Fraud Squad about what they would consider to be very low key fraudulent activity involving the use of an EPA, but none the less…they do take the referral and take is somewhat seriously, but I guess the limitations with that is that they have got a significant number of cases that they deal with that would be very significant fraud that they're investigating, rather than up to, say, $10,000 being removed from someone's account, which could be someone's entire life savings and it means something to them, but in terms of the bigger picture of what the Fraud Squad deal with, it's small pickings (Interview Four).*

This has implications for the possibilities of recovering the money. If the abuser is not charged, who will make them pay back the money? This then has impacts on the future well-being and standard of living of the older person.

Finally, there is the issue of the older person's decision-making capacity and the way this may impact on any financial abuse investigation. If the older person does not have capacity at the time of the investigation, sometimes it is not clear when they may have lost capacity – was it before or after the power of attorney/banking arrangements/nominee agreement was signed? The above issues are all large and complex and deserving of further investigation and discussion in future research.

11.7 Discussion and Conclusions

Financial abuse may have a profound effect on the future of the older person. The impact of financial losses may be greater for older people than younger generations as older people may have neither the time nor the capacity to recover from financial loss (Lowndes et al 2009). Financial abuse may also cause extreme emotional distress or depression, increased dependence on others, a change in address, decreased resources for medication or health care and a diminished quality of life, and thus a shorter life expectancy (Kemp and Mosqueda 2005).

Identifying, defining and assessing cases of suspected financial abuse is often difficult and has therefore hampered criminal and civil remedies (Kemp and Mosqueda

2005). Legal definitions of such abuse may lag behind clinical understandings (Kemp and Mosqueda 2005).

Kemp and Mosqueda (2005: 1124-5) have developed a framework for evaluating cases of alleged financial elder abuse, which includes the following eight elements:

1. An older adult who possesses assets is vulnerable to financial abuse and undue influence from others because of any of a variety of medical, pharmacological, psychological, or social problems.

2. Another person, one who the older person typically trusts, takes advantage of that vulnerability through any of a variety of deceptive actions. These actions constitute the undue influence or the exploitation. The perpetrator may have a long-term relationship with the older person, or it may be a new relationship. The trust may have been established through a personal relationship, by a supposed professional position, or because the older person lacked alternatives. The undue influence may be manifested by deceit, creating dependency, intimidation, becoming overly involved in the older person's life or in other ways that take advantage of any vulnerability.

3. Assets, either currently negotiable (e.g. cash) or of future value (e.g. trusts) are transferred from the older person to the perpetrator. The transfers are made during the period of vulnerability.

4. The older person or the transactions are kept isolated, controlled, or secret.

5. A qualified expert did not conduct an appropriate assessment of the older person's capacities and vulnerabilities before the transfer of assets to determine whether it was in the best interest of the older person and whether the older person was acting with sufficient mental capacity, self-determination, and in the absence of undue influence.

6. If the assets are transferred, the benefits to the older person are not proportional to the value of the assets transferred to the perpetrator, or the transfer is not consistent with the older person's prior beliefs, wishes, or behaviour.

7. Common business or person ethics are not followed. No agreements are made in writing, there is not full disclosure of the nature of the transaction, there is no right to change one's mind, there is no verification that the older person fully understood the arrangement, or there are conflicts of interest.

8. The alleged perpetrator does not give consideration to the effect of the transaction on others, including the victim, other family members, beneficiaries, or the public welfare system.

This framework, or others like it, may be used to better evaluate financial abuse and assist in establishing guidelines to prevent and manage it or a matrix of abuse with specific

interventions to combat each type. (Lowndes et al 2009). This would allow discreet targeting of forms of financial abuse, both for research and for intervention (Lowndes et al 2009).

12 QUALITATIVE ANALYSIS AND FINDINGS (DR BLACK BLUNDELL AND PROFESSOR MIKE CLARE)

Two of the researchers read the 312 pages of interview transcripts to identify the key messages about under-reporting of needs and concerns about potential and actual incidents of elder abuse in the current network of elder abuse services. Responses to the questions posed and discussed during the 14 individual/group interviews and the two focus group meetings were identified and are presented in four ways throughout this report:

1. ***Contextual and background material***: Questions 1, 2, and 5 provided important contextual information about each of the services which has informed the researchers' understanding of the service network in Western Australia.

2. ***Organisational perceptions of – and responses to – the needs of vulnerable groups in the community***: These are the responses to Questions 7, 8, 10, and 11 which are summarised and presented in Appendix 8.

3. ***Current organisational definitions of and responses to elder abuse***: These are the focus of Questions 3, 4, and 6 and the responses to these questions are summarised and presented separately below – along with recommendations – in the first part of this chapter.

4. ***Under-reporting of elder abuse and suggested law, policy and practice changes***: These questions go to the core of the project – and inform responses to the remaining research interview questions (9, 12, 13, and 14) which focus on respondents' views of the extent of elder abuse in Western Australia. Their responses form the basis of the second section of this chapter; this includes a review of perceptions of the current system and its responses to expressed and perceived needs – along with suggested areas for legal, policy and practice changes. Findings from the analysis of responses are integrated with conceptual and policy/practice literature in the final chapter, Implications and Recommendations for Elder Abuse Law, Policy and Practice (p.85).

12.1 Current Organisational Definitions of and Responses to Elder Abuse

Question 3 – How do cases of elder abuse come to the attention of your organisation?

This question is about the capacity of the community and APEA: WA organisations to recognise and respond directly or indirectly to incidents of elder abuse. The current service system relies heavily on public awareness so that people know that they can contact someone for information, assistance and formal intervention. They must be willing both to

make contact and to report and discuss their concerns. The system then relies on agencies making correct referrals if they cannot assist directly - with the likelihood of privacy and confidentiality barriers. Finally, the current system relies on agencies having necessary internal assessment and decision-making processes to deal with elder abuse issues.

The organisations have different functions; only three agencies are specifically for elder abuse (Advocare, APEA, OPRS) while others have a broader range of clients, such as Disability Services Commission or the Public Trustee, including older people who may be experiencing abuse and are a smaller sub-set of their total clientele.

Currently, there is no mandatory reporting of incidents of whatever type of elder abuse other than for allegations of physical and sexual abuse in aged care facilities. Recent federal government legislation requires concerns are reported to Aged Care Complaints Investigation and the WA Police by the person being abused or by their family and friends - or by workers in the aged care facility.

In all other agencies with broader mandates, sometimes concerns about possible types of elder abuse come to the attention of staff while they are carrying out other processes, e.g., assessing needs, providing services or participating in a family meeting. The client initiates a conversation about their concerns directly - or concerns are raised by a member of the family, a friend or another service provider. While the identification of elder abuse is not the primary focus of the agency involvement, a crisis might emerge as a necessary secondary focus as a consequence. Implications for the elder abuse system include:

- Staff and client education about elder abuse services available as a preventative strategy to generate appropriate referrals from within these groups highlights the importance of continuing education in generating referrals.
- Production and updating of education materials – brochures, fact sheets, website.
- Monitoring referrals generated by word of mouth and through telephone contacts to ensure referrals of concerns are referred to the correct agency to deal with the situation e.g., OSIV.

RECOMMENDATION 10

In the light of the reported 'invisibility' of this social issue, Advocare needs to be funded to provide an annual public education campaign of multi-media information (television and newspaper coverage; brochures of agency information and referral information) which is regularly updated.

> **RECOMMENDATION 11**
>
> Given the importance of risk and needs-assessments carried out by front-line practitioners directly and indirectly involved in monitoring and reporting concerns, Advocare needs to be funded to provide a sector-wide training program to service-provider agencies about types of elder abuse, the network of agencies funded to respond and current research information about needs and risks.

Question 4 – How does your organisation define elder abuse?

A brief summary of the interview responses suggests that:

- Five agencies follow the Advocare / APEA definition,
- Two agencies follow the Advocare / APEA –plus 'professionals of trust' definition
- Three agencies have a different focus given their agency specialism

    However, the time may have arrived for a review of the definition of elder abuse:

    We would look at it, on a paper definition, with what's in the protocols booklet [APEA: WA Elder Abuse Protocols], but recent conversation, internally and at other organisations' meetings, perhaps we do need to look at redefining what elder abuse actually means. For example, the discussion that was recently had at the WANPEA meeting about accountants and accountants are defrauding their clients. It's a very blurry area as well, if that accountant has been with that client for ten years, does that mean that then that they are a person in a position of trust? … Is it just fraud? Or is it elder abuse? So, the jury is out at the moment. I'm beginning to think, well perhaps it is time for another look at the definition (Interview Seven).

Question 6 – In what capacity does your organisation assist directly/ indirectly in such cases?

A summary of key points emerging from the interviews is presented below:

- APEA functions well as an inter-agency network in which all members are equal with no one agency in charge or with the power to drive anything. While there are benefits in collaborative arrangements, there is a possible parallel between the voluntariness of APEA: WA participation and the voluntariness of relationships and decision-making between a referred older person at risk of abuse and an agency's capacity to intervene.
- Feelings of powerlessness and futility of older people's situations may be being mirrored in the cultures of some of the organisations that assist them, for example neither Advocare nor the Office of the Public Advocate is legislated with the power to compel participation and outcome. While the Older Person's Rights Service, the WA Police, and the State Administrative Tribunal have some legal authority, only the State Administrative Tribunal can press charges without the will of the abused person.

RECOMMENDATION 12

There needs to be a review of the current network of service agencies responding to allegations of different types of elder abuse with particular attention to the balance of voluntary and statutory authorities and capacity to intervene in situations of abuse.

The second cluster of key points is related to above, but more fits under the general heading of the quality of inter-agency political leadership and integrated policy and practice response:

- There is no coherency and consistency in the way information about possible and actual concerns is gathered; this ranges from current difficulties in recording 'concerns' in an accessible cross-agency manner through to ambiguities about 'when is a crime not a crime?' Some aspects of data-gathering will be the focus of the second part of the study which addresses an analysis of quantitative data collected by a number of the APEA: WA agencies

- While there is a Government agency 'in charge', the Office for Seniors Interests, there has been some reductions in staffing and in project leadership.

- While the biggest agency involved in aged care and elder abuse is the WA Health Department, there is a network of federal and State health services with the risk of fragmented, 'pass the parcel' responses to potential elder abuse concerns. Unfortunately, there were no interviews with senior managers from the WA Health Department to explore current policy developments in this area.

RECOMMENDATION 13

APEA: WA to seek funding to explore the arguments for and against the design of an inter-agency data-base of reported concerns to build a picture through time of the possible vulnerability of an older person. Confidentiality and privacy issues will need to be addressed but there is a precedence in child protection services.

12.2 Under-reporting and Suggestions for Policy and Practice Changes

The responses to the remaining questions (9, 12, 13, and 14) which focus on respondents' views of the extent of elder abuse in Western Australia form the basis of the second section of this chapter; there is an important and informed review of perceptions of the strengths and lesser strengths of the current network of services in Western Australia and the quality of responses to expressed needs – along with a rich and multi-faceted list of suggested areas for policy changes. Recommendations emerging from the responses to

these core questions will be merged with broader conceptual and policy literature in a later chapter.

Question 9 – What do you believe is the extent of under-reported Elder Abuse within the WA community? On what do you base this opinion?

In direct contrast with the previous question, answers about under-reporting were consistent in their agreement that there is considerable under-reporting in WA of incidents of elder abuse – along with reasons supporting their views which can be clustered under three headings:

1. The older person in the community

   - Invisibility and isolation of the elderly

   - Ambiguous concept – elder abuse is hard to notice and hard to define

   - Degrees of all sorts of abuse – who knows and who cares

   - Lack of capacity in older people to know how to protect themselves

     I suppose the other issue would be in the metropolitan area if they don't have any professional support going into the home or professional reviews occurring for the patient or client, then the neighbours may not notice because people can be a lot more anonymous in metropolitan areas (Interview Six).

2. Family matter - culture or crime (fraud / assault / neglect etc)

   - Privacy of family – shame

   - Fear of the consequences – prison for perpetrator; further isolation of the victim; risk of exclusion from grand-children

   - Not talked about – denial / rule of optimism

   - Inter-generation family culture of abuse

     …it completes the triangle – child abuse, family violence, and elder abuse, and it's the life cycle of violence, you know, and we stopped right there at family violence, and we went over the...and until the world sees that there are...in fact, it's a circle, from life to death you can be violent...in a violent situation (Interview Five).

3. Legal issues

   - Need for specific Elder Law

   - Lack of formal induction for Power of Attorney

   - No register or auditing of EPA

   - Sense of early entitlement by relatives

   - Too easy to withdraw money from banks and Centrelink – current attitudes are too casual

     My thoughts are, there's a lot of financial abuse that we never would hear about. Not all large amounts, but certainly lots of smaller amounts, simply because they just don't get to the State Tribunal or the elderly person passes away. There's so many people think, "Well, Mum or Dad, they don't need the money any more" or "They'd want me to have it". Nobody

picks it up. Whilst our percentages are less than one percent I think there's a lot of it happens that just doesn't ever get detected (Interview Eight).

Question 12 – What suggestions do you have about the ways in which other organisations might respond more effectively to elder abuse?

The answers to this question were fascinating; they capture the commitment of all of the respondents to the invitation to reflect on the multi-systemic nature of this complex issue and provide a number of different pathways towards changes in law, policy and practice in relation to elder abuse. The following section will be structured under particular headings with concrete suggestions for improvement – illustrated by a quote which underlines the diversity of suggested initiatives:

1. Develop an integrated data system

   - Enable agency access to data from other agencies – improve efficiency

   - Build a central data-base

   - More effective communication / liaison between agencies

     ...you might have three or four agencies going in and if you've seen the forms that you have to fill in now for HACC services they're about 15 pages long and if every agency goes in and does these forms...it's the same with elder abuse. You've got different agencies going in trying to assist the person, so you need to know what's happened prior because an old person (Interview One).

2. Re-energise a whole of government response

   - Re-invigorate the whole of government / cross agencies Active Ageing Strategy – recognising the risks of social isolation

     There's the Active Ageing Taskforce report and recommendations… it's a long time since I revisited it. That's 2003, so that was under the former government (Interview Four).

3. Legislative review

   - Review Enduring Power of Attorney legislation

   - Review of the Guardianship and Administration Act to strengthen powers

     A young adult will likely need it for the rest of their life and that order will be reviewed at least once every five years for the remainder of that time. So it stays with us (Interview Nine).

4. Involve the banks in preventative and reactive ways

   - Involve the banking industry in developing safeguards for the accounts of elderly people

     I started with the Banking Ombudsman's website and they said, on page such-and-such on their website a list of people I could get in contact with, but when I went there, they were all in the Eastern States anyway (Interview Two).

5.   Address financial abuse/fraud

- Develop mechanisms – banks and Centrelink – to address risk of financial abuse

The major banks have certainly got plenty of money. It shouldn't be that hard for them to identify a program that would pick up the sort of transactions that were happening on the little old lady's bank account, where she'd been drawing $300 a week and then suddenly it was $1,000 a day (Interview Eight).

6.   Leadership and change initiatives

- Agencies need to work together

- Conduct research but then follow-up on the policy and practice recommendations about gaps/ cracks in the system

- Need drama and art to present the current issues – to capture the audience

- Plan a National Conference

I was quite disappointed when I heard that there wasn't funding for a national conference, and I think that you need some people that are passionate about this and that they get together and they do something (Interview Seven).

7.   Three integrated responses

- Other agencies to develop policies about responding to Elder Abuse – to include referral to the WA Police

- Introduce a Register of Wills – to reduce conflict and ambiguity

- Include the banks in a policy and practice response – too many accounts are vulnerable to transactions

Sometimes it...you know, we just don't need to see it happen. If we don't look at it, it's not happening. …………..you'll have a person who's quite financially well off who, the only people who know about it is their immediate family, who do take advantage of it, at the end of the day. You've got all those sorts of issues, but again, if you made it mandatory reporting like you do with AUSTRAC for people who put into the bank more than $10,000 at a time or they put into the bank an amount of money under $10,000 too often, get reported, likewise, if you flag people who are of retirement age, and suddenly they're fortune starts dwindling very quickly, maybe the bank should have to report it (Interview Ten).

8. Enduring Power of Attorney

- Implement a system for registering and auditing Enduring Powers of Attorney

There is widespread criticism of the current system….a number of problematic issues including a lack of accountability and safeguards (Interview Four).

and:

- Register and monitor Enduring Power of Attorney processes while recognising the costs and the complexities

- Mount a regular public education strategy for Enduring Powers of Attorney at both State and Commonwealth levels – usually a State issue

> *I think, for example, that Enduring Powers of Attorney, in terms of the orders that we can make in relation to Enduring Powers of Attorney, we can revoke them, we can vary them, and we can order records to be filed and audited, but after that, there's no remedy, that's it. Other jurisdictions have remedies within the Provisions (Interview Eight).*

9. Identify the Lead Agency

- Agencies without policies to develop a policy on Elder Abuse

- Develop a lead agency with specialist capacity across the sector

10. And a few other things

- Develop agency capacity to assess when to support, advocate or refer to the Police

- Clarify the nature of each agency's responsibility in this complex practice area

- Increase public sensitivity to the issues

- Address pass the parcel of inter-agency avoidance of responsibility

> *...maybe if organisations that can respond and deal with it, if we're all on the same page and we're clear about each other's roles and boundaries...we're all working together just to solve it instead of trying to pass it on (Interview Five).*

Question 13 – What suggestions do you have about necessary policy/ legislative changes to enhance the quality of responses to Elder Abuse within the community

Question 14 – Do you have any other comments about needs and responses to elder abuse in the WA community?

Responses from these two questions have been analysed and integrated to consolidate a number of suggested changes to the legislative, policy, and practice responses to the complex and multi-dimensional issues of elder abuse. The extent of overlap between the responses from the individual agency interviews provides an unexpected source of triangulation of individual opinions about necessary changes in this complex policy and practice area: the list of suggested systemic changes is presented below:

1. 1. Significant support for greater media coverage and public education – as happened and continues to happen in Child Abuse

- Use television and the media to advocate for the rights of the elderly

- Public education about Elder Abuse

- Need for World Elder Abuse Awareness Day and an educational program to raise alertness

- Needs to be greater community awareness – advertise the State Administrative Tribunal

- Needs to be more community information about elder abuse in anticipation of the baby boomer generation

- Essential to address current issues given the predicted demographic changes

- Address profiling, attitudes and education

- Need an increased level of awareness through the elderly community – and through the whole community

- Public education to enhance awareness of the issue – greater community alertness

- Need to increase awareness – as happened with child abuse

> *…look how the children, since mandatory reporting, how it's just gone through the roof, hasn't it? But if you thought that nothing was going to happen, you'd probably get disenchanted with identifying it in the first place, so if people knew...if we were all going to work together, and if they had a concern and shared it, that it was going to be investigated, or, not investigated by the cops, but by somebody who had the skill and the mandate for them to look into it a bit more (Interview Six).*

> *We need changes to the legislation so that elder abuse becomes a crime, and then people will do something about it. I think that seems to be the way that child abuse has gone, and I think that's why it is lost in domestic violence, because there's sort of no hat to hang it on. I think if you had, I don't know...in the States, they have this Elder Law and transgressions can be dealt with; you can enforce it (Interview Two).*

2. Address public attitudes of ageism and the privacy of the family

   - Address attitudinal things – like the privacy of the family, norms about inheritance and respect for the frail elderly

   - Particular challenges in families with a disabled person who may become the carer of frail parents / carers

   - Essential to address current issues given the predicted demographic changes

   - Need to address the issue of a breakdown of trust within families

   > *That's the saddest part about it, I guess, it's usually a family member that they think 'they'll do the right thing by me' and the ugly green monster climbs out of their back and greed takes over, but, yeah, that's probably the only down side of it (Interview Eight).*

3. Develop greater clarity about the network of services – establish a flexible and neutral first response service for initial advice about options

   - Develop a flow-chart of services

   - Greater clarity about the network of agencies to contact about concerns, likely responses and contact details – a liaison contact for advice about needs, risks and concerns

   - Introduce Mandatory Reporting of Elder Abuse by practitioners – to lead to counselling / intervention or reporting to the Police

   - Develop a telephone service for people with concerns – anonymous service leading to a response from someone in authority

- Needs to be an agency that offers advice about needs and services – and there needs to be much more public education in the community – another element of Pre-Retirement Seminars

- Develop a more flexible approach to the explorations of concerns with a family

    There needs to be like...some sort of intervention...a flexible intervention, a legal flexible intervention on family agreements and stuff like that (Interview Five)

4. Register Enduring Powers of Attorney - recognising some caution because of cost and complexity but awareness of initiatives in NZ and UK

    - Caution about registering Enduring Powers of Attorney – complex and expensive process

        In New Zealand, when they reviewed their legislation, they looked at registration and they decided not to go down the path of registration having given it full consideration. …..In England and Scotland they do have registration and I think one of the positive things about the English system is people have to send in their...I think they're called Lasting Powers of Attorney, but EPAs when they're made (Interview Four).

    - Establish a register for Enduring Powers of Attorney

    - Register of Powers of Attorney - using the Department of Land Administration mechanism for registration of Enduring Powers of Attorney before they can be used for transacting land.

        People don't understand them...they're just written up by a lawyer. Some law firms are better at it than others because they do it all the time, and others are bad at it..(Interview Five).

        - Enduring Power of Attorney and current weaknesses in the legal processes

        Queensland's more recent than ours. The UK legislation is … taking account of...just understanding how these things can be misused…. I think, in the UK, once the person loses capacity you've got to register with the Court of Protection, you've got to file...it's more of a mechanism like our Administration orders, so, I think it does probably need to be looked at and the mechanisms reviewed, the protective mechanisms. Because the EPA probably is, as we sort of say, the third easiest way to financially abuse someone (Interview Nine).

5. Involve banks actively – train their staff - make use of existing protections (AUSTRAC and DOLA)

    - Offer training for Bank staff about risk of financial abuse / fraud – develop protocols about alerts when unusual transactions occur

    - Develop awareness about risk – and protocols in banks and in Centrelink for withdrawals from another's account

    - Reduce the ambiguity and ambivalence

    - Banks need to be part of the monitoring of the well-being of the elderly

        Whether banks need to set up, and they can do, a sort of policy in regard to monitoring, or do they hand it over to a similar body, like AUSTRAC, who have access to all accounts and

everything that goes through the system, and the banks have to report to them, and again they have analysts who can readily say, "Oh well no, that's been happening" or they can say, "Well this looks a bit suspicious" and then they can report it to the appropriate authority. Like they do now in AUSTRAC (Interview Ten).

- Involve the banks in this area of public concern

I still come across cases where the banks don't understand what an Enduring Power of Attorney is, - so an educative...and banks are fairly laws unto themselves. They do very, very odd things, and so educating the banks would be educating them more to picking up instances where things might not be quite right (Interview Nine).

6. Leadership and Advocacy

- Need to work with other agencies and networks eg COTA to lobby government for changes
- Need a United Nations Convention on the Rights of the Elderly in Australia
- Need for World Elder Abuse Awareness Day – educational program to raise alertness
- Needs more active State and Commonwealth government activity
- Need an Elder Abuse Champion – not the same as an Aged Care Champion

  ...look how the children, since mandatory reporting, how it's just gone through the roof, hasn't it? But if you thought that nothing was going to happen, you'd probably get disenchanted with identifying it in the first place, so if people knew...if we were all going to work together, and if they had a concern and shared it, that it was going to be investigated, or, not investigated by the cops, but by somebody who had the skill and the mandate for them to look into it a bit more (Interview Six).

  I think the no tolerance approach to elder abuse is a good one. Using television and media to get the messages of the rights of our elderly and the instances of elder abuse identified (Interview One).

7. And, finally:

- Change the name from Elder Abuse to Abuse of Older People because of the confusion with Aboriginal elders   (Interview One).

13 QUANTITATIVE STUDY ANALYSIS AND FINDINGS (DR JOSEPH CLARE)

13.1 Data Collection Strategy

In consultation with Advocare, member agencies from APEA: WA were contacted with respect to locating quantitative data of relevance to scoping the nature and extent of elder abuse in WA. The assumption was that no single agency would have definitive data covering all aspects of this issue. However, the objective was to make a best effort at gathering all available information to scope this problem in WA. To achieve this end, all agencies were asked to provide data that could meet as many of the following criteria as possible: (a) contain information about victim age (with a capacity to distinguish victims who are aged over 55 for Aboriginal people and over 65 for non-Aboriginal people); (b) contain information about the type of victimisation experienced, (c) contain information about the relationship between the victim and the perpetrator; (d) contain information about the area within WA which this occurred in. In addition to this, agencies were asked to provide up to 5-years worth of data if this were possible. Data collection communication commenced around May 2010 and concluded in December 2010[19].

13.2 Analysis Approach

Of the agencies that were contacted with this request, quantitative data of some form was provided by the following: (a) Advocare, (b) the WA Police, (c) Disabilities Services Commission (data no use as indicator was for 18 and over only), (d) Health Department, and (e) Office of Public Advocate.

13.3 Advocare Results

Advocare provided data that contained incidents which occurred between September 2002 and June 2010. However, as only six records were included from 2002 and 2003, these years were excluded from the remainder of this analysis resulting in a total of 3,130 incidents. Of these, 299 incidents were excluded because the age of the victims was recorded and fell outside the range of 65 years to 99 years. The breakdown of incident frequencies is displayed in Table 3, below, which demonstrates that the type of abuse that occurs most frequently in this database is financial (28.6%), followed by psychological abuse (27.4%), and unclassified abuse (16.0%).

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19 With the exception of the WA Health Department data, which was updated when the initial research results were reviewed in March, 2011.

Table 3. Demonstrating the relative frequencies of abuse encountered by Advocare between 2004 and June 2010

Abuse classification	N	%N	Cumulative %
Financial	811	28.6%	28.6%
Psychological	777	27.4%	56.1%
Physical	298	10.5%	66.6%
Neglect	283	10.0%	76.6%
Social	194	6.9%	83.5%
Sexual	14	0.5%	84.0%
Unknown	454	16.0%	100.0%

Table 4. The demographic characteristics available for victims in the Advocare records

Variable	Sub-category	N	%N	Cumulative %
Sex	Female	1,943	68.6%	68.6%
	Male	726	25.6%	94.3%
	Unknown	162	5.7%	100.0%
Age group	65-69	148	5.2%	5.2%
	70-74	306	10.8%	16.0%
	75-79	296	10.5%	26.5%
	80-84	332	11.7%	38.2%
	85-89	253	8.9%	47.2%
	90-94	279	9.9%	57.0%
	95-99	68	2.4%	59.4%
	Unknown	1,149	40.6%	100.0%
Birth place	Australia and New Zealand	935	33.0%	33.0%
	Europe	602	21.3%	54.3%
	Asia	137	4.8%	59.1%
	Rest of the world	76	2.7%	61.8%
	Unknown / blank	1,081	38.2%	100.0%

Table 4 summarises the demographic characteristics of the victims included in the Advocare data extract. Over two-thirds of the incidents captured in the Advocare data involved a female victim, and the age of the victim was not recorded for over 40% of the records that were retained for analysis. The absence of information was also an issue for the country of origin of victims, with this information unknown in over one-third of cases. A further one-third of victims were born in either Australia or New Zealand, and 21% were born

in Europe. There was no Aboriginal indicator in the Advocare data, and it was not possible to track individual victims through multiple incidents in the dataset provided.
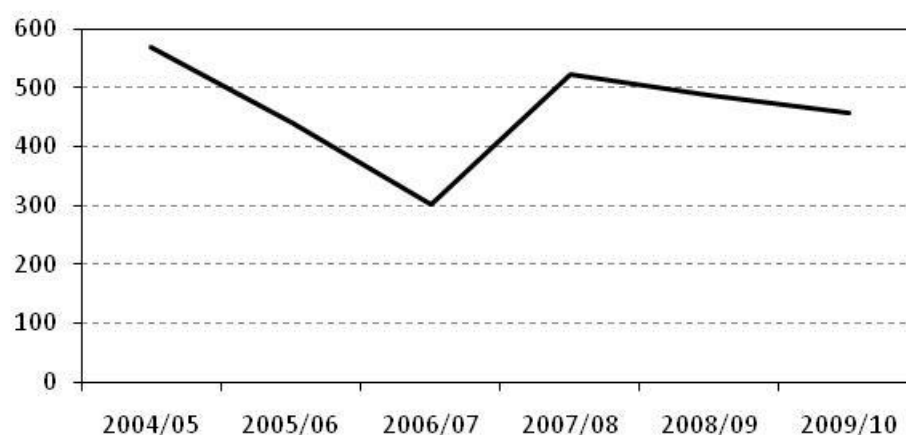

Figure 3. Frequency of Advocare incidents between July 1, 2005 and June 31, 2010

Figure 3 displays the incidents of abuse recorded on Advocare's database between July 1, 2004 and June 30, 2010. As can be seen, there has been a reduction in the absolute number of incidents recorded over this period of time, with a particularly sharp decline observed between 2004/05 and 2005/06 (22.5% reduction). Relative to the 2004 financial year, the number of incidents recorded in 2009/10 is 19.8% lower.

Table 5. The relationships between the victim and the abuser from Advocare records

Abusers relationship to victim	N	%N	Cumulative %
Spouse	238	8.4%	8.4%
Sibling	55	1.9%	10.3%
Parent	8	0.3%	10.6%
Children	106	3.7%	14.4%
Grandchild	95	3.4%	17.7%
Resides with Abused	556	19.6%	37.4%
Friend / Neighbour	142	5.0%	42.4%
Carer	227	8.0%	50.4%
Other	250	8.8%	59.2%
Unknown	1,154	40.8%	100.0%

Table 5 demonstrates the relationships between victims and their abusers as recorded in Advocare data. The first thing to note about this data is that the relationship status was 'unknown' over 40% of the time. For the remainder of the incidents, the most frequent types of relationship between victim and abuser were recorded as residing with the abused (19.6%), 'other' (8.8%), and spouse (8.4%).

13.4 WA Police Results

The period time included in the WA Police data extract was July 1, 2005 until October 31, 2010 (5 years, 4 months). A total of 54,814 incidents were retained for analysis after the data was sorted to only include victims whose ages were between 65 and 99. Given the non-specific nature of the definition involved for elder abuse, all incidents involving victims of this age were included in the analysis. This is arguably too broad, however, given this is a scoping exercise and one designed to identify issues that need to be addressed into the future, this approach was considered appropriate. The breakdown of incident frequencies is displayed in Table 6, below. As can be seen from this table, the most frequent incident type that occurs in this database involves stealing (37.2%), and all property type, acquisitive crime combines to represent 70.0% of the cases analysed here. Damage-type offences account for a further 26.0% of this dataset, with assaults and threats representing 2.9% of the total.

Table 6. Frequencies of incidents (by offence name) extracted from WA Police data

Offence Name	N	%N	Cumulative %
Stealing	20,397	37.2%	37.2%
Burglary and Commit	11,289	20.6%	57.8%
Damage	11,120	20.3%	78.1%
Burglary with Intent	4,565	8.3%	86.4%
Graffiti	2,167	4.0%	90.4%
Steal Motor Vehicle	1,962	3.6%	94.0%
Common Assault	1,035	1.9%	95.8%
Criminal Damage	732	1.3%	97.2%
Assault Occasioning Bodily Harm	299	0.5%	97.7%
Threats	236	0.4%	98.2%
Damage by Fire	233	0.4%	98.6%
Robbery with Aggravation	140	0.3%	98.8%
-All other offences*	639	1.2%	100.0%

Note: * All other offences combined here had individual frequencies of 60 or less (0.1% or less of total offences). These included the following: Armed Robbery in Company, Wounding, Threaten Violence, Stealing from a Person, Steal Goods in Transit, , Indecent Assault, Robbery, Stealing of Animals, Assault Serious, Deprivation of Liberty, Driving Causing Death, Grievous Bodily Harm, Aggravated Indecent Assault, Assault Public Officer, Aggravated Sexual Penetration, Steal MV and drive dangerously, Robbery Whilst Armed, Assault with Intent, Assault with Intent to Rob, Sexual Penetration, Driving Causing Death / Grievous Harm, Going Armed in Public to Cause Fear, Murder, Wilfully Light Fire to Damage Bushland, Demand Property Intent to Extort, Kill Animal with Intent, Sex Offences against Incapable, Attempts to Extort by Threat, Discharge Firearm to Cause Fear, Acts Intended to Cause GBH, Threats With Intent to Influence, Robbery Whilst Armed (Attempt), Acts/Omissions with Intent to Endanger Life, Acts/Omissions with Intent to Harm, Endanger Safe Use of Aircraft, Manslaughter, Sexual Offences by Relative, Abduction, Demand Property with Threat, Disable to Commit Offence, Steal from Locked Room/Box, Unlawful Act Causing BH, and Use Carriage Service To Threaten.

Over the period of time from July 1, 2005 to June 30, 2010, there was a marked increase in the number of incidents involving victims aged between 65 and 99 that came to the attention of the WA Police (see Figure 4). Relative to the 2005/06 financial year, these figures represent an increase of 31.4% in 2008/09. Relative to the 2005 financial year, the number of incidents in 2009/10 is 22.9% higher.
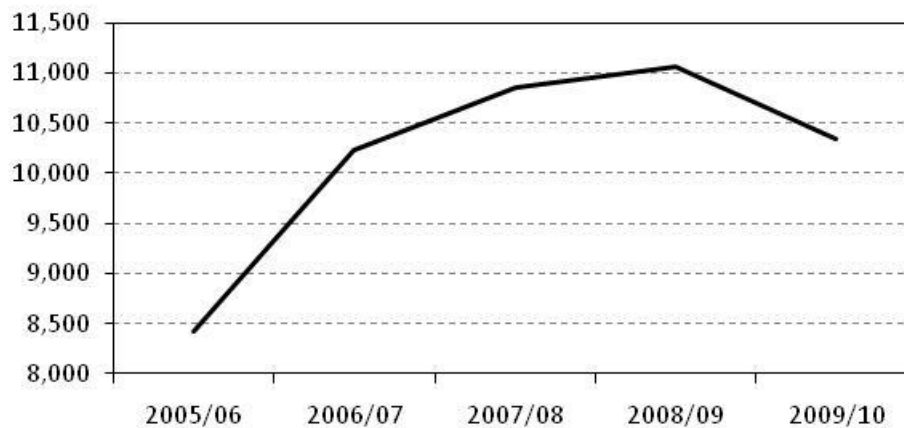

Figure 4. Frequency of WA Police incidents involving victims aged 65 to 99 between July 1, 2005 and June 31, 2010

From a victimisation perspective, these incidents involved 38,556 distinct victims, giving an average 5-year incidence rate per victim of 1.42 incidents.[20] Of these, 76.0% had only experienced a single victimisation incident, with a further 16.2% of the sample having experienced two victimisation incidents. This means, however, that 7.8% of the victims identified through this process (equating to 3,008 individuals) experienced at least 3 separate victimisation incidents over this 5-year time period. Furthermore, a small group of individuals (112) experienced 10 or more incidents over this time, with the greatest number of victimisation experiences recorded being 92. The descriptive statistics for the victims included in this database are outlined in Table 7. Overall, victimisation was relatively evenly distributed between males and females, and there was a skew towards victims closer to 65, which is consistent with expectations based on population distributions. There was no ethnicity information recorded for over 60.0% of victims, and in cases where this information was collected victims were recorded as Caucasian 89.1% of the time. The majority of the incidents that have been included in this database took place within Metropolitan Perth.

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[20] This data was determined by identifying distinct combinations of the unique victim identifier, the date that the incident occurred on, and then offence identifier.

Table 7. Descriptive statistics for the victims included in the WA Police database

Variable	Sub-category	N	%N	Cumulative %
Sex	Female	18,337	47.6%	47.6%
	Male	19,246	49.9%	97.5%
	Unknown	973	2.5%	100.0%
Age group	65-69	14,671	38.1%	38.1%
	70-74	9,681	25.1%	63.2%
	75-79	6,886	17.9%	81.0%
	80-84	4,459	11.6%	92.6%
	85-89	2,095	5.4%	98.0%
	90-94	624	1.6%	99.6%
	95-99	140	0.4%	100.0%
Ethnicity	Caucasian	13,293	34.5%	34.5%
	Southern European	729	1.9%	36.4%
	Aboriginal	377	1.0%	37.3%
	Asian	268	0.7%	38.0%
	Indian / Pakistani	149	0.4%	38.4%
	Middle Eastern	40	0.1%	38.5%
	Pacific Islander / Maori	32	0.1%	38.6%
	Southern / Central American	22	0.1%	38.7%
	African	7	0.0%	38.7%
	Unknown	23,639	61.3%	100.0%
Victimisation frequency	1 incident	29,313	76.0%	76.0%
	2 incidents	6,235	16.2%	92.2%
	3 incidents	1,682	4.4%	96.6%
	4 incidents	598	1.6%	98.1%
	5 or more incidents	728	1.9%	100.0%
Offence region	Metropolitan Region	31,433	81.5%	81.5%
	Regional WA	7,123	18.5%	100.0%

A unique offender identifier was recorded for 6,146 of the total incidents (11.2%). This sub-group of victimisation incidents involved 3,840 distinct offenders, committing a rate of 1.60 offences against a person aged between 65 and 99 over the period of interest. Of these offenders, 28.0% had been identified for committing multiple offences against elderly victims, and 3.5% of this offender sample had committed 5 or more offences against elderly citizens during this period of time (with a maximum of 92 offences attributed to the same offender). These results are displayed in Table 8, below.

Unlike the victimisation demographics discussed previously, the offender statistics display a much greater percentage of younger people and males involved in perpetrating these crimes. This is entirely consistent with offending behaviour regardless of victim's age, however, and is as expected. Over 40.0% of the offenders identified for perpetrating these crimes were identified as Aboriginal, and a much greater percentage of events where an offender was identified occurred in regional WA (relative to the distribution of all victimisation, which was predominantly occurring in the metropolitan area).

Table 8. Descriptive statistics for the identified offenders included in the WA Police database

Variable	Sub-category	N	%N	Cumulative %
Sex	Female	703	18.3%	18.3%
	Male	3,024	78.8%	97.1%
	Unknown	113	2.9%	100.0%
Age group	Under 15	794	20.7%	20.7%
	15-24	1,565	40.8%	61.4%
	25-34	724	18.9%	80.3%
	35-44	423	11.0%	91.3%
	45-54	197	5.1%	96.4%
	55-64	85	2.2%	98.6%
	Over 65	52	1.4%	100.0%
Ethnicity	Aboriginal	1,664	43.3%	43.3%
	Caucasian	1,526	39.7%	83.1%
	Pacific Islanders/ Maori	53	1.4%	84.5%
	East Asian	39	1.0%	85.5%
	Southern European	38	1.0%	86.5%
	Arab and Middle East	20	0.5%	87.0%
	African / African American	19	0.5%	87.5%
	Indian/ Pakistani	18	0.5%	87.9%
	Southern/ Central American	8	0.2%	88.2%
	Unknown / blank	455	11.8%	100.0%
Victimisation frequency	1 offence	2,763	72.0%	72.0%
	2 offences	640	16.7%	88.6%
	3 offences	219	5.7%	94.3%
	4 offences	84	2.2%	96.5%
	5 or more offences	134	3.5%	100.0%
Offence region	Metropolitan Region	2,246	58.5%	58.5%
	Regional WA	1,594	41.5%	100.0%

For this subset of cases that included a unique offender identifier it was also possible to calculate how frequently distinct victim-offender pairs appeared in the dataset. This analysis revealed that 87.4% of the cases where the offender was identified involved a unique victim-offender pairing and that in a further 10.2% of the cases, the offender had victimised the same person twice during the period of interest (summing to 97.6% of all cases where the offender was identified). An important subset of cases where identified, however, involving many incidents with a common victim and offender pairing. The previously mentioned case with 92 offences actually turned out to involve a single victim-offender pair.

13.5 The Disabilities Services Commission Results

The Disability Services Commission requires all services funded by the Commission to report incidents of abuse, neglect and family/domestic violence via its Serious Incident Reporting (SIR) system. A data extract was undertaken by the Disabilities Services Commission for this research and the following caveats must be acknowledged before considering the data: (a) All incidents reported are in relation to victims; (b) The data collection system allows for the selection of a number of different forms of abuse; (c) There can be variation between organisations about when they report a situation as a serious incident and when it is classified as abuse or neglect; (d) The SIR form has included data on Aboriginal/Torres Strait Islander people and those from a culturally and linguistically diverse (CALD) background for the past two years; (e) Data is collected in the following age groups: 0-6, 6-12 and over 18; and (f) Access to Commission services was originally for those aged 0 to 60 however recently the access criteria was reviewed and the age range altered to 0 to 65. As can be seen from this disclaimer, it is not possible to separate out incidents involving elderly victims, which makes it difficult to draw any relevant conclusions from this data. However, aspects of this data are presented in Table 9 for completeness and to accurately reflect both the data collection process and the efforts and cooperation of the Commission.

Table 9 displays the cumulative total of all incidents involving persons over the age of 18 between 2005 and 2009. Some interesting trends are present in this data, however, including (a) the large reduction overall in the number of incidents the Commission is encountering over this time (indexed value reducing to 59.4 relative to 2005), (b) the reduction in the percentage of neglect and sexual abuse cases encountered within each year (18.2% in 2005 down to 2.0% in 2009 for neglect and 37.1% decreased to 10.9% for sexual abuse), and (c) the large increases in the relative percentages that physical and emotional abuse contribute to the incident mix over this period of time (36.5% to 43.6% for physical abuse, and 0.6% up to 31.7% for emotional abuse). The relative percentages of

cases in each year that involved Aboriginal/Torres Strait Islander people over the age of 18 are indicated in the final line of the table. Interestingly, despite the overall number of cases captured by the Commission's database over this time period, the relative percentage of cases involving Aboriginal/Torres Strait Islander people triples between 2005 and 2009.

Table 9. Cumulative total of all incidents of abuse, neglect and family/domestic violence involving persons over the age of 18, 2005 to 2009

Type of abuse	2005	2006	2007	2008	2009
Physical abuse	36.5%	41.1%	39.6%	37.5%	43.6%
Neglect	18.2%	0.6%	3.5%	2.9%	2.0%
Sexual abuse	37.1%	20.3%	11.8%	26.9%	10.9%
Emotional abuse	0.6%	29.1%	34.7%	21.2%	31.7%
Domestic violence	7.6%	8.9%	10.4%	11.5%	11.9%
Total incidents	170	158	144	104	101
Indexed change (2005)*	100.0	92.9	84.7	61.2	59.4
% cases within year involving Aboriginal/Torres Strait Islander people over 18	5.3	7.6	14.6	9.6	16.8

Note * Australian Bureau of Statistics (2010) explanation for index: "Note 55. In order to compare two values of recorded crime it is necessary to designate one of the time periods as the 'reference' period and setting its value to 100.0. (This period is referred to as the base period or year as it is the first period for constructing the index). The index for all other periods (i.e. the comparison values) is calculated by determining the ratio of the comparison period value to the reference period value and then multiplying by 100.0. For example, suppose the recorded crime rate was 200 victims per 100,000 persons for a particular offence at 2001 (period 1), and for 2002 (period 2) it was 300 victims per 100,000 persons. 2001 (period 1) would be designated as the reference value or base year giving an index of 100.0 (200/200x100). The index value for 2002 (period 2) or the comparison value becomes 150.0 (300/200x100). The movement between 2001 (base year) and 2002 (comparison value) would be 50%.

13.6 The WA Health Department Results

A data extract was prepared by the Western Australian Department of Health in March, 2011. This extract was based on hospital separation data captured in the Hospital Morbidity Data System, Data Integrity Directorate, and incorporated hospital separations where a specified coded for assault or maltreatment appeared in any diagnosis and external cause code field for the reporting period 2005/06 to 2009/10. The scope of this data was limited as it only reflects possible hospitalisation due to assault and maltreatment, and as such caution should be used with this data. This process identified a total of 18,685 records, which incorporated 866 separations that involved patients aged 55 or older on admission (4.6% of cases). There was no indication made whether these incidents involved repeat patients across this time period. Two summary tables were provided by the Department of Health as a result of this extract. The first provided information about the number of hospital discharges in WA due to assaults or maltreatment by age and cause from 2005/06 to

2009/10 (displayed in Table 10). For the total of these incidents, maltreatment cases comprised only 4.1% of cases, and maltreatment involving patients aged 55 and over comprised only 5.5% of these. In comparison, patients aged 55 and over accounted for 4.6% of the assault cases captured by this extract.

Table 10. Descriptive statistics for the patients hospitalised due to assault and maltreatment in WA for reporting period 2005/06 to 2009/10

Cause of Hospitalisation		Financial year of separation					
		0506	0607	0708	0809	0910	Total
Maltreatment	0-17	72	102	95	80	65	414
	18-54	81	77	58	61	34	311
	55+	6	10	13	6	7	42
	Total	159	189	166	147	106	767
Assault	0-17	294	289	264	267	281	1,395
	18-54	2,888	2,888	3,229	3,325	3,369	15,699
	55+	139	155	141	185	204	824
	Total	3,321	3,332	3,634	3,777	3,854	17,918
Total	0-17	366	391	359	347	346	1,809
	18-54	2,969	2,965	3,287	3,386	3,403	16,010
	55+	145	165	154	191	211	866
	Total	3,480	3,521	3,800	3,924	3,960	18,685

The second table provided by the Department of Health displayed the number of hospital separations in WA with a code for assault or maltreatment in any diagnosis or external cause code field by age (0-17, 18-54, and 55+) and indigenous status (Aboriginal and other) from 2005/06 to 2009/10. Aspects of this information have been summarised in Figure 5, which displays the within-indigenous status percentage of patients who were aged 55 and over at each time interval (in columns) and the total number of incidents involving a patient aged 55 and over across the 5 time intervals (solid black line). As can be seen from this figure, in all time periods the relative percentage of non-Aboriginal patients aged 55 and over was greater than for Aboriginal patients. Overall, in for the 2009/10 data, patients aged 55 and over made up just over 5% of the total discharges due to assaults or maltreatment. A 26.2% increase in the absolute number of these cases involving this age group of patients was observed over the period of time displayed here.
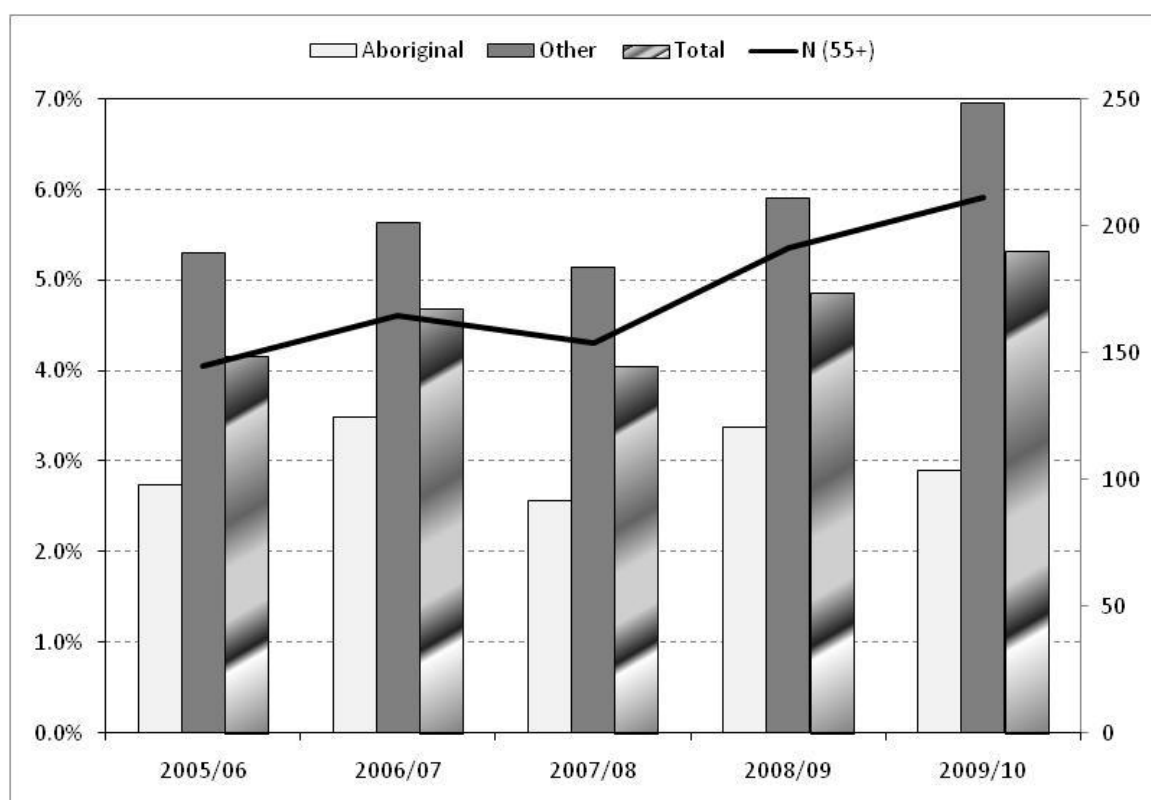
Figure 5. Within-Indigenous status percentages of patients who were aged 55 and over (and yearly total collapsed across all patients) hospitalised due to assaults or maltreatment, 2005/06 to 2009/10

13.7 The Office of the Public Advocate Results

The Office of the Public Advocate advised that there are current limitations in their capacity to supply the data for the range of questions of interest for this research. Although they have recently established a new case management system, the researchers were advised that the Office of Public Advocate does not capture the data requested. From a quantitative data perspective, the agency advised that at the time of producing this report, elder abuse has been identified as an issue in need of additional record keeping. In addition to this, the current data collection system makes no record of victim-offender relationship status. However, the researchers were advised that quantitative data is available in published annual reports summarising: (a) new investigations into advocacy and investigation, and (b) new guardianship orders appointing the Public Advocate. These reports are available online and the data summarised below discusses aspects of this information.

The first type of data that gives some insight into the general activity of the Office of the Public Advocate is the number of advocacy and investigation cases occurring each year

in WA. From the 2009/10 annual report, "The Public Advocate investigates, advocates, and provides recommendations on the need for guardianship and administration in the best interests of adults with a decision-making disability." One component of this process involves, "investigating any complaint or allegation from the public that a person with a decision-making disability may be at risk of abuse, exploitation or neglect and may be in need of a guardian or administrator or is under an inappropriate order." The 2009/10 annual report continues to indicate that, "The continued demand for the Office of the Public Advocate to conduct investigations into the personal or financial welfare of adults with a decision-making disability can largely be attributed to WA's ageing population." The numbers of new investigations alleging abuse for victims aged over 65 are displayed in Table 11, below. Across these types of abuse, it is clear that financial abuse is the most frequently recorded (60.0% of cases across the time period), followed by neglect (23.1% overall). The indexed change demonstrates that there has been a 67.9 increase in the total number of cases observed in 2009/10 relative to 2006/07.

Table 11. Number (and within-year percentage) of new investigations alleging abuse by type of abuse for victims aged over 65 undertaken by the Office of the Public Advocate, 2006/07 to 2009/10

Type of abuse	2006/07		2007/08		2008/09		2009/10		Total	
	N	%	N	%	N	%	N	%	N	%
Financial abuse	35	62.5%	65	61.3%	63	60.6%	53	56.4%	216	60.0%
Neglect	6	10.7%	26	24.5%	25	24.0%	26	27.7%	83	23.1%
Physical abuse	4	7.1%	7	6.6%	5	4.8%	6	6.4%	22	6.1%
Psychological abuse	9	16.1%	8	7.5%	9	8.7%	9	9.6%	35	9.7%
Sexual abuse	2	3.6%	0	0.0%	2	1.9%	0	0.0%	4	1.1%
Total	56	100.0%	106	100.0%	104	100.0%	94	100.0%	360	100.0%
Indexed change (2006/07)				189.3		185.7		167.9		

Note: Data taken from consecutive annual reports and multiple types of abuse could have been included per application.

The 2009/10 annual report also indicates that "The Public Advocate makes personal, lifestyle, and treatment decisions in the best interests of an adult with a decision-making disability when the State Administrative Tribunal determines there is no one else suitable, willing, and available to be appointed as that person's guardian." There are number of main guardianship functions that the Public Advocate performs, amongst which is "protecting the

represented person from abuse, exploitation and neglect." The data demonstrating the trends in the number of guardianship appointments over this period of time are displayed in Table 12, below. This table demonstrates that while the relative percentages of new appointments involving dementia have remained constant across this time period, the volume of new appointments being dealt with has almost doubled.

Table 12. Number of new guardianship orders appointing the Public Advocate, 2006/07 to 2009/10

	2006/07	**2007/08**	**2008/09**	**2009/10**
New appointments	114	187	231	224
# Dementia	52	87	83	99
% Dementia	45.6%	46.5%	35.9%	44.2%
Indexed change (2006/07)		164.0	202.6	196.5

13.8 Conclusions about the Quantitative Investigation of Elder Abuse in WA

By way of summary, there are some major components of the findings from these various sources of data presented below:

- The Advocare data indicated that financial and psychological abuse were the most frequent types this agency encounter, the victims were predominantly female, and both the relationship to the abuser and the ethnicity of the victims were unclear in a large percentage of cases. The trend in the Advocare data suggested a reduction in the number of cases of abuse.
- Analysis of the WA Police data also revealed that the vast majority of cases recorded by this agency involved victimisation for acquisitive crimes, and physical victimisation was very rare in comparison. There was incomplete information about victim ethnicity in this data set, but there was indication of repeat victimisation (with about 8% of victims experiencing 3 or more incidents in the 5-year time period). From an offending perspective, there was a sub-set of repeat offenders, and also indication of same-victim-same-offender pairings. Both of these patterns could be very useful from a crime prevention perspective. Overall, this dataset revealed an increase in the frequency of these types of incidents since 2005.
- The Disabilities Services Commission data lacked an appropriate age division, but the data that was provided indicated an overall decline in the number of cases this agency is encountering relative to 2005.

- The WA Health Department data indicated that assaults/maltreatment cases involving patients aged 55 and over only account for about 5% of the hospital admissions data provided. However, there has been an increase in the number of these cases involve this age group over the period of analysis.
- The Office of the Public Advocate data again revealed financial abuse to be the most frequent type encountered, followed by neglect. This agency has also experienced an increase in volume over the period of interest.

Overall, across these data sources, it appears that financial abuse is the most common type of abuse that is currently being recorded by these agencies, with neglect and psychological abuse the next most prevalent. There is indication of a trend overall for increased volume of cases involving older members of the Western Australian community. However, there was also a consistent degree of uncertainty about the relevance and quality of the data provided for this exercise.

In concluding this section of the report, it is important to reflect on a number of aspects of this process. First, it is important to emphasize how willing the agencies were to be involved in this exercise. Second, it is also crucial to highlight that none of the agencies indicated they felt confident their data was going to accurately reflect the extent to which this issue presents itself in society. While there appeared to be a general awareness that quantitative data collection could be strengthened, a major cause of this uncertainty appeared to stem from the subtle ambiguity about how 'elder abuse' can really be quantified. What are the inclusion criteria for cases? Although some arbitrary guidance was provided to achieve this end (with respect to age, relationship status between victims and perpetrators, etc.), these were essentially 'best-guess' proxy measures attempting to identify experiences that should not happen to vulnerable victims. The issues discussed previously, with respect to definitions of elder abuse and complexity in drawing real distinctions between this and other crimes and abuses that are worthy of attention in their own right, were clearly exposed as a consequence of attempting to estimate frequency.

Thinking about these issues in a different way, and combining with recommendations about the need for a more carefully thought-out framework about protection of vulnerable adults, it is more useful to utilise quantitative data to drive a risk-assessment process that ensures the most vulnerable are not falling through the gaps that occur between agencies (and longitudinally, within agencies). Building on the recommendations made by Mauro (2008) it is important that the data systems for agencies involved with managing risk for vulnerable sections of the community in WA develop to better capture relevant information (e.g., the risk assessment tool used by Cohen, Levin, Gagin, and Friedman, 2007, to examine disparities between disclosure, evident signs, and high-risk of elder abuse).

These developments should be informed by theoretical models explaining variations in risk between individuals, and data bases should be updated (or designed) in consultation with statisticians/ researchers to ensure the greatest likelihood that the data that is being recorded is in an appropriate format to facilitate extraction and analysis. Importantly, if a focus is shifted towards prevention of harm to vulnerable adults, this would target attention on a broad range of service providers that were not included in this research, such as fire prevention and health (from a mental illness, addictions, or injury prevention perspective). This perspective is endorsed by the suggestions of the Fire Chief of Greater Manchester, Steve McGuirk (2010, p.19) with respect to the overlaps between fire and vulnerability when suggesting that:

> *Fire, in fact, is as much a social phenomenon as it is a combustion process, and fires follow very clear trends in relation to when and where they occur. The people most at risk are the same people vulnerable to a range of other social disadvantage and deprivation factors – it really is a shared agenda.*

In this sense, the quantitative data analysis and databases should contribute to the process of identifying vulnerability and risk. This process should then be used to operationalise resources, across agencies, in the most effective manner to ensure vulnerable people are being best served. The types of harm, abuse, and victimisation these vulnerable people could potentially be exposed to are not new and do not need renaming, particularly not based on arbitrary characteristics such as age. Instead, these demographic characteristics need to be evaluated for suitability as risk factors (static or dynamic) and combined with other quantifiable information to drive resource allocation and attention in a strategic way. In view of the inevitable increase in the proportion of the community who will meet the criteria of vulnerability as the population ages, decision-making tools will become dramatically more important to prioritise resourcing and ensure effective service delivery.

RECOMMENDATION 14

Quantitative data analysis and databases should contribute to the process of identifying vulnerability and risk, and data should be used to drive a risk-assessment process that ensures the most vulnerable are not falling through the gaps. This process should then be used to operationalise resources, across agencies, in the most effective manner to ensure vulnerable people are being best served. Data systems for agencies involved with managing risk for vulnerable sections of the community in WA must develop to better capture relevant information and these developments should be informed by theoretical models that explain variations in risk between individuals and undertaken in consultation with statisticians/ researchers.

14 IMPLICATIONS AND RECOMMENDATIONS FOR ELDER ABUSE POLICY AND PRACTICE

14.1 Towards Greater Clarity about Policy and Practice Leadership

There is insufficient clarity about which agency has primary responsibility across the elder abuse service response area. This is further complicated by there being a wide range of available services and agencies which may encounter elder abuse - with a diverse collection of referral agencies. While staff in some agencies are informed and educated about responding to elder abuse appropriately, there may be significant variation in recognition and response across the organisations and sectors involved. Concern has been raised in previous research that no agency has responsibility for the coordination of a government-wide response to elder abuse in general (OPA 2006). Elder abuse is a complex issue which needs to be approached in a multidisciplinary way, and consequently any policy and guidance must be developed from agencies collaborating together.

Key points emerging from the study interviews were:

- Re-invigorate the whole of government/cross agencies Active Ageing Strategy – recognising the risks of social isolation.
- Other agencies to develop policies about responding to Elder Abuse – to include referral to the WA Police.
- Agencies without policies to develop a policy on Elder Abuse.
- Develop a lead agency with specialist capacity across the sector.
- Develop agency capacity to assess when to support, advocate or refer to the Police.
- Clarify the nature of each agency's responsibility in this complex practice area.
- Address pass the parcel of inter-agency avoidance of responsibility.
- Change the name from Elder Abuse to Abuse of Older People.

RECOMMENDATION 15

That a lead government agency is identified and given the responsibility to develop and coordinate responses to elder abuse across metropolitan and regional Western Australia – including a review of the concept, elder abuse itself as well as developing agreed referral processes to the WA Police.

RECOMMENDATION 16

That the development of elder abuse protocols in all agencies instrumental to responding to elder abuse be supported and encouraged in conjunction with interagency protocols to encourage consistent responses.

RECOMMENDATION 17

That a comprehensive elder abuse referral and resource guide for service providers and professionals be developed.

RECOMMENDATION 18

That elder abuse networks for service providers in both the metropolitan and rural and remote areas of Western Australia be supported and facilitated.

14.2 Inter-Agency Collaborative Intervention

There are a number of family-based practice models in child protection, juvenile justice and domestic violence services which are of relevance to the challenges of inter-agency and inter-disciplinary collaboration in the care and protection of older people; there is a strong argument for the design of an integrated and multi-level continuum of responses to possible and confirmed elder abuse to include:

- Improved information-sharing between agencies to include a register of 'concerns' from a number of different sources – to have the capacity to store, access and weigh evidence of concern and possible risk in a more integrated, aggregated and accessible way

- Inter-agency first-level responses which provide information and an initial assessment of concerns; Family Group Conferencing (Clare 2000) could be applicable to this early intervention strategy for those elderly people who are cautious about police and court involvement. Fitzgerald et al (2009: 109) report a victim survey finding that,

    Respondents were worried that if we call abuse a crime, and it could not be resolved via the criminal justice system, then victims might be left with no resolution at all.

- Inter-agency investigation and intervention to include both risk-assessment and a family-focused intervention strategy; there are parallels in child protection practice with Signs of Safety Meetings (Turnell and Edwards 1999) and in juvenile justice practice with Juvenile Justice Teams (see Figure 6).

- Referral to the police leading to a criminal investigation and the possibility of the perpetrator coming before the courts.

- Inter-agency policy and review meetings – with APEA: WA as a model in place.

      Key points emerging from the study interviews were:

- Enable agency access to data from other agencies – improve efficiency.

- Build a central data-base.

- More effective communication / liaison between agencies.

- Agencies need to work together.

- Need a United Nations Convention on the Rights of Older People in Australia.

- Confirmed need for World Elder Abuse Awareness Day – with an educational program to raise alertness – celebrated this year on 15 June

- Needs more active State and Commonwealth government activity.

- Need an Elder Abuse Champion – not the same as an Aged Care Champion.

- Develop a flow-chart of services.

- Greater clarity about the network of agencies to contact about concerns, likely responses and contact details – a liaison contact for advice about needs, risks and concerns.

- Develop a telephone service for people with concerns – anonymous service leading to a response from someone in authority.

- Needs to be an agency that offers advice about needs and services – and there needs to be much more public education in the community – another element of Pre-Retirement Seminars.

- Develop a more flexible approach to the explorations of concerns with a family.

RECOMMENDATION 19

      APEA: WA to explore the design and implementation of a State-wide inter-agency electronic data register of concerns with the capacity to store, access and weigh evidence of concern and possible risk in a more integrated, aggregated and accessible way.

RECOMMENDATION 20

      APEA: WA to conduct an audit of family-based practice models in child protection, juvenile justice and domestic violence services which are of relevance to the challenges of inter-agency and inter-disciplinary collaboration in the care and protection of older people, including Family Group Conferencing as early intervention.

14.3 Community Education about Risks of the Various Types of Elder Abuse

Given the evidence of incidence and prevalence of different types of elder abuse and the problems of recognising and responding effectively to the needs and concerns of the current population of older Australians, it is clear that there needs to be a concerted public education campaign to increase personal, family and community awareness of risks and services. This issue surfaced in a number of the project interviews:

- Increase public sensitivity to the issues
- Use television and the media to advocate for the rights of the older people
- Public education about Elder Abuse
- Need to make better use of World Elder Abuse Awareness Day and an educational program to raise alertness
- Needs to be greater community awareness – advertise the State Administrative Tribunal
- Needs to be more community information about elder abuse in anticipation of the baby boomer generation
- Essential to address current issues given the predicted demographic changes
- Address profiling, attitudes and education
- Need an increased level of awareness through the elderly community – and through the whole community
- Public education to enhance awareness of the issue – greater community alertness
- Need to increase awareness – as happened with child abuse
- Address attitudinal things – like the privacy of the family, norms about inheritance and respect for the frail elderly
- Particular challenges in families with a disabled person who may become the carer of frail parents/carers
- Essential to address current issues given the predicted demographic changes

14.4 Case Management/Not Case Management: for Complex Tasks

According to Lunn (2011), the 'baby-boomer' generation is desperate to avoid nursing home care and to receive health care and human services in their own homes; this has significant implications for the development of housing and human services – particularly given the predicted population increase to almost five million older Australians. A relevant integrated Case Management decision-making and practice framework (Clare 2000; Moxley 1989: Cambridge 1992) was developed in Kent, England in the 1970's in negotiated community care services for the elderly and people with disabilities to enable them to maintain their independence (Challis and Davies 1986).

In the United States, around the same time, Case Management was developed by the North American Association of Social Workers as an integrated practice response for people living with chronic needs and disadvantage – including the long-term unemployed, people living with mental illness and young people leaving out of home care services. These services were often fragmented and uncoordinated; the systemic practice model involves negotiating with the 'consumer' about needs assessment, planning, service delivery and review and evaluation.

This must not be confused with case management – a synonym for key worker - because the Case Manager is the lead professional whose role is the coordination of information, resources, intervention and evaluation. The model would fit within the multiple agencies currently involved in risk-assessment and intervention with older people; it would involve the formal identification of one accountable lead Case Manager responsible for the coordination of needs assessment, resources and monitoring the delivery of services from numerous agency case managers.

RECOMMENDATION 21

APEA: WA to explore the establishment of a pilot program involving Advocare, the Health Department of WA, the WA Police and other service-providing agencies to explore the strengths and concerns of the Case Management inter-agency model of family meetings as one response strategy when there are concerns about possible abuse of older people.

14.5 Towards Inter-Agency Joint Working – A UK Case Study

The Safer Slough Partnership - Community Safety Strategy 1999-2002 was published in 1999; it is a multi-agency study based initially on an audit of crime and disorder in Slough - a multi-ethnic West London community. The multi-systemic study involved a three part process:

- An audit of crime and disorder in the locality,
- Development of a Community Safety Action Plan and
- The implementation of the Community Safety Strategy (London Borough of Slough 1999).

The audit of crime revealed that almost 36% of recorded crime in Slough was committed by young people, many of whom were not attending school – although they were only 6% of the population. There are numerous short-term and longer-term risks when children are out of school – including petty crime, experimenting with drugs and alcohol, and severely diminished life-chances. The published material provides a recent example of multi-

department government change in England – as a vision for further work in Western Australian policy development in complex services for vulnerable older people and their families. Figure 6 shows the separate government departments and their programs prior to the formation of the multi-disciplinary and multi-agency Youth Offending Teams; the outer ring identifies the previously separate government departments – with their services and programs listed below in the middle ring. In the centre is the multi-agency and multi-disciplinary Youth Offending Team which is now established – a possible parallel for aged care services in Western Australia?

This is a very good example of an integrated, multi-disciplinary and multi-agency ('whole of government') approach to address the evidence of disadvantaged life chances of young people, many of whom were in the care of the government/care leavers. While the overall nature of the findings of the audit may not be surprising, they provide accurate data on which to plan an integrated preventive and intervention response; this project led to the development of integrated Youth Offending Teams across the whole of England and Wales and illustrates the complexity of inter-agency partnerships put in place to develop a systematic intervention addressing community safety.

RECOMMENDATION 22

APEA: WA to consider the way forward in Western Australia to an inter-agency investigation and intervention service aiming to protect vulnerable older people – informed by the case study outlined in the London Borough of Slough Framework (Figure 6).


14.6 Statutory Care and Control Response to Elder Abuse

Brown (2009) outlines a three-level strategy in policy development in relation to elder abuse – in ways that parallel the multi-level strategy in child protection policy and practice. The first level, ***Primary Prevention***, seeks to avoid abuse occurring by creating informed and responsive communities with community-based formal and informal services supported by a community education program. A West Australian study of community attitudes to elder abuse by D'Aurizio (2008: 6) involving a survey of over 800 people highlighted a low level of community awareness of available support services available to vulnerable older people

> It is evident from the research that the need exists for an educational campaign directed at the general population of Western Australia that raises awareness about the issue of elder abuse and provides people with information on the support services available.

Fitzgerald et al (2009) also conducted a telephone survey of people who had previously contacted the Elder Abuse Response Line and concluded that more needs to be

Figure 6: Unitary Youth Offending Context Map (p.33, Safer Slough Partnership – Community Safety Strategy, 1999-2002)
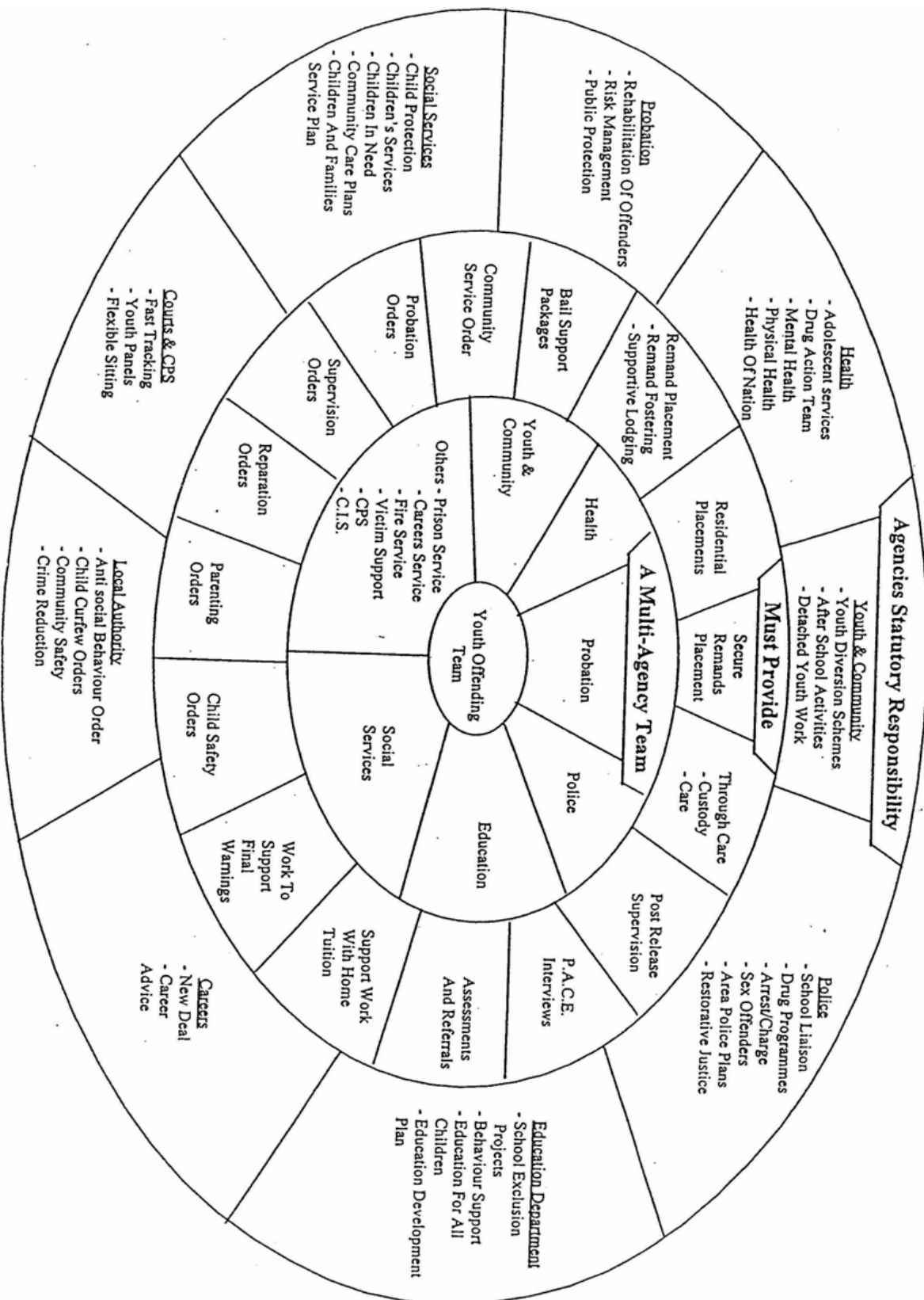
done in terms of awareness-raising among the public to enhance early recognition of abuse and prompt action by and on behalf of vulnerable people.

At the ***Secondary Prevention Level,*** both Brown (2009) and Fitzgerald et al (2009) underline the importance of relevant and clear policies and guidelines – as well as guidance and training about roles and boundaries – for paid care staff, including good recruitment, induction and screening policies and procedures. They also talk about the importance of strengthening the safe routes for whistle-blowers to report their concerns about abusive attitudes, practices and behaviour.

Clare (1992: 7) reflects on some of the challenges embedded in aged-sensitive practice, including potential marginalising of the aged in the media, in advertising and in the images of 'normal' we are encouraged to accept; Clare asserts:

> *The aged pose a psychic threat in contemporary, secularising societies. They remind us of our own mortality and that of those we love and/or may feel obligations towards.*

Finally, at the ***Tertiary Prevention Level***, there is a need for a paradigm shift from a primarily 'helpful and caring' service to a continuum of services and programs that includes a statutory 'care and control' authority informing the role and responsibilities of some helping professionals and the WA Police. This level would reflect organisational and professional lessons from both child protection and domestic violence services and would include:

- A designated government department as lead agency; this could be the ACAT Teams in the Department of Health or the creation of a new Department for Protection of Older People.

- An integrated and inter-agency Case Management model of practice in the assessment and response to risk.

- The use of a form of family mediation service when appropriate as early statutory intervention.

- Referral to WA Police for investigation when there are concerns about the risk of harm to an elderly person – whether physical, emotional, sexual or financial.

Dixon et al (2010: 414) studied the expectations of those in 'positions of trust' of more than 2,000 people in the UK aged 65 or older; they underline the importance of the high level of practice wisdom required by those who need to work effectively with likely ambivalence, denial and minimising of risk and harm at this tertiary level,

> *A strong message emerging from the in-depth interviews… policy and practice discourses surrounding 'elder abuse' must acquire a more subtle and realistic understanding of the nature of trust and its role in vulnerable people's dealing with others*

RECOMMENDATION 23

Advocare to explore with the Minister for Seniors and with possible funding sources, including LotteryWest, the advantages of mounting a national conference in Perth by June 2012, to explore the challenges of a more integrated model of primary, secondary and tertiary responses to respond to the needs of vulnerable older people.

14.7 Managing Risk and Comprehensive Risk Assessment

There is a need for inter-agency and inter-professional research, policy development and ongoing professional development through national and international projects and conferences; comparing the number of journals and conferences about child protection and out of home care with those in aged care in the community confirms the extent of the need. Fitzgerald et al (2009) reflect on the challenges of managing risk to vulnerable older people in the community – in the context of caring networks of family and friends – and assert:

- The process requires an assessment tool which is fit for the purpose and administered in a professional rather than a technical manner through relationship-building not just information-gathering – as in other risk scenarios of child abuse and domestic violence.
- Practitioners in this complex task need ongoing professional education and effective professional supervision of their practice to maintain an authoritative alertness to signs and concerns – both stated and minimised
- Risk assessment needs to be seen as an ongoing process not an event – hence the need for an inter-agency register of concerns

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RECOMMENDATION 24

APEA: WA to coordinate a process by which appropriate needs and risk assessment tools for working with vulnerable older people are identified, reviewed and piloted to agree a State-wide assessment tool which is fit for the purpose and administered in a professional rather than a technical manner through relationship-building not just information-gathering – as in other risk scenarios of child abuse and domestic violence.

14.8 Review of the Current Legislation

A number of observations were made in the study interviews about the needs for legislative review, including:

- Need for specific Elder Law

- Lack of formal induction for Power of Attorney

- No register or auditing of EPA

- Review Enduring Power of Attorney legislation

- Implement a system for registering and auditing Enduring Powers of Attorney

- Caution about registering Enduring Powers of Attorney – complex and expensive process

- Register and monitor Enduring Power of Attorney processes while recognising the costs and the complexities

- Mount a regular public education strategy for Enduring Powers of Attorney at both State and Commonwealth levels – usually a State issue

- Register of Powers of Attorney - using the Department of Land Administration mechanism for registration of Enduring Powers of Attorney before they can be used for transacting land

- Review of the Guardianship and Administration Act 1990 to strengthen powers

- Introduce a Register of Wills – to reduce conflict and ambiguity

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RECOMMENDATION 25

APEA: WA recommends to the State Attorney General that a review of Elder Law is undertaken with specific attention to the law in relation to Enduring Power of Attorney, the Guardianship and Administration Act and the introduction of legislation requiring the registration of wills.

14.9 The Position of the Banks in Relation to Elder Law

The position of the banks in relation to Elder Law and financial abuse was identified as an area of concern in relation to inappropriate withdrawal of funds by family, friends and carers from an older person's bank account and the growing risk of internet fraud by strangers. Observations in the interviews about this type of financial abuse included:

- Too easy to withdraw money from banks and Centrelink – current attitudes are too casual

- Involve the banking industry in developing safeguards for the accounts of elderly people

- Include the banks in a policy and practice response – too many accounts are vulnerable to transactions

- Offer training for Bank staff about risk of financial abuse / fraud – develop protocols about alerts when unusual transactions occur

- Develop awareness about risk – and protocols in banks and in Centrelink for withdrawals from another's account
- Banks need to be part of the monitoring of the well-being of the elderly

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RECOMMENDATION 26

APEA: WA continue to work with the major banks to design and implement an integrated strategy to address the risks of financial abuse and fraud which victimise older people in Western Australia; such work to include an invitation for the network of the major banks to become an active member of APEA: WA.

14.10 Final Reflection

Working towards the development of a new Requisite vision shaping the legislative and organisational context of aged care policy and practice is a huge challenge; it requires political, policy and professional recognition of the service gaps and their implications for vulnerable older people, their families and the professionals working with them.

The operational vision of the academics, policy-makers and agency managers who, in the late 1980's, developed the Looking After Children case practice tools for professionals working with children living in the care system in the UK (Clare 1997) was inspirational; their vision was that the designed system should be *'good enough for their own children'*. In Western Australia, we need a care and protection system for older citizens which is good enough for each of us as we approach our own vulnerabilities.

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16 APPENDICES

Appendix 1

Re: Collaborative Research project between The University of Western Australia and Advocare Inc.

Financial assistance from Lotterywest has enabled this much needed collaborative scoping project between Advocare Inc and the University of Western Australia to begin. Advocare is an independent advocacy agency which advocates and protects the rights and best interests of older people.

This research project, which will be conducted by Professor Mike Clare and Dr Joe Clare of the University of Western Australia, is entitled **"*Examination of the Extent of Elder Abuse in Western Australia: A Qualitative and Quantitative Investigation of Existing Agency Data*."** It will enable a better understanding of the way elder abuse information is kept across the variety of Departments and agencies that are currently in the front line for dealing with elder abuse. The research will also contribute to elder abuse statistics being held in a more uniform manner across Departments and agencies. This will ultimately lead to improved response planning for incidents of elder abuse.

The research is important because of the ageing demographics of the population and the now outdated estimates of the prevalence of elder abuse which indicate that between two and five percent of the older population are at risk or have experienced some form of elder abuse (Westhorp et al, 1997).

Aims of the research:
The greater understanding of elder abuse practices gained across a range of Departments and agencies will increase the knowledge about the way that elder abuse information is currently stored within agencies associated with the Alliance for the Prevention of Elder Abuse (APEA: WA), which has been established under the auspices of Advocare Inc. The research will have further benefits in that it will:

- allow scoping of the extent of elder abuse in the WA community.
- assist in identifying unmet need
- encourage key agencies to refine their responses to elder abuse.
- contribute to informing legislation

Advocare Inc. will allow the researchers access to data from the Advocare database for research purposes and two senior members of the Advocare staff will be available for interviews. I would like to take this opportunity to encourage your Department / agency to participate in this valuable research project.

Yours sincerely

Greg Mahney
CEO Advocare Inc.

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The extent of elder abuse in WA
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Appendix 2

21 December, 2009

Re: Lotterywest funded research into "Examination of the extent of elder abuse in Western Australia: a qualitative and quantitative investigation of existing agency data"

Dear APEA: WA Member Agency,

As an organisation within the Alliance for the Prevention of Elder Abuse (APEA: WA), I am writing to inform you about a Lotterywest Research Grant that Advocare Inc. was recently awarded to undertake a research scoping exercise entitled, "*Examination of the extent of elder abuse in Western Australia: a qualitative and quantitative investigation of existing agency data.*" This research has been conceived in partnership with Professor Mike Clare and Assistant Professor Joe Clare, both from the University of Western Australia; Dr Barbara Blundell is the other member of the research team.

The aim of this scoping exercise is to synthesize the qualitative and quantitative information stored within each of the APEA: WA organisations to provide a coherent, consistent estimate of the extent to which elder abuse is occurring in WA and to identify the current capacity to address this issue. With the support of the APEA: WA members, the research team are hoping to conduct interviews with no more than two practitioners from each of the agencies and undertake a triangulated analysis of relevant quantified, de-identified agency data held across organisations.

It is anticipated that this information will inform elder abuse prevention practices for local agencies and may lead to some adjusted responses if required. In addition to producing a locally-focussed report designed to reduce elder abuse in WA, the researchers are expecting to present the project findings at relevant conferences and publish in appropriate academic journals.

To maximise the positive impact of this research, I am asking you to consider allowing your agency to participate in the two components of this exercise. The first, involving an interview between one or two senior representatives from your organisation and the researchers, will emphasise the issues and challenges facing your agency with respect to definition and response to elder abuse. All the responses that you provide will remain confidential and will

only be used for the purposes of establishing the key issues, challenges and possible future directions for the responses to elder abuse in Western Australia. With your consent, the researchers will make digital audio recordings of the interview and they will also take notes during the interview. Following the interview, the written comments will be stored in a locked filing cabinet and the digital audio files will be stored on password-protected computers. Only members of the research team will have access to the notes and audio files. The anonymity of all participants will be safeguarded at all times throughout this research and no individual will be identified as the source of any comments or opinions in any report, presentation, or publication of these research results. The interviews will be conducted by Dr Barbara Blundell and Professor Mike Clare and it is anticipated that they would take no longer than 45 minutes.

The second component of this research will involve the triangulated analysis of existing agency data that may provide insight into the extent to which elder abuse is coming to the attention of agencies in Western Australia. Given this is an emerging issue, and clear definitions of the extent of acts that could constitute this type of abuse have yet to be decided upon, this process will involve agencies working with Dr Joe Clare to extract the best available 'proxy' measures for elder abuse within their existing database structures.

It is important to emphasise that these extracts will be de-identified and no efforts will be made to identify any individual victim of abuse. Instead, the purpose of this component of the scoping exercise will be to determine the extent to which existing data collection practices (when considered across-agencies) are able to capture the full scope of elder abuse. Dr Clare has undertaken a similar style of analysis using existing agency data when attempting to determine the relative rates of Indigenous family violence across rural and remote area of Australia. Furthermore, it should also be made clear that in all cases the respective caveats and limitations that agencies identify with their own data will be included and explained in the final report.

Obviously, the involvement of your agency in this scoping exercise is entirely voluntary. However, it should be noted that the extent to which the relevant APEA: WA agencies participate in this process will directly determine the validity of the results, which in turn will influence the overall benefits that can be gained.

You will receive this letter as an attachment to an invitation letter from Mr Greg Mahney, CEO Advocare; to participate in this project; other attachments are two Information Sheets and Consent Forms from the UWA Human Research Ethics Approval application for this project.

If you would like to discuss these issues any further please contact Professor Mike Clare (mclare@cyllene.uwa.edu.au).

Yours sincerely

Mike Clare

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Appendix 3

Examination of the Extent of Elder Abuse in Western Australia: A Qualitative and Quantitative Investigation of Existing Agency Data

INFORMATION SHEET – INTERVIEWS

Chief Investigators:

Research Assistant Professor Joe Clare, Professor Mike Clare, and Dr Barbara Black

Contact Details:

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Barbara Black   Email *********@hotmail.com
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The aim of this research is to synthesize the qualitative and quantitative information stored within each of the Alliance for the Prevention of Elder Abuse (APEA: WA) organisations to provide a coherent, consistent estimate of the extent to which elder abuse is occurring in WA. This research will involve: (a) a literature review, (b) qualitative analysis of the output from interviews with practitioners from each of the APEA: WA agencies, (c) a triangulated analysis of relevant quantified, de-identified agency data held across organisations, and (d) focus groups, composed of service providers from non-APEA: WA organisations that also come into contact with elder abuse issues. Through completion of this scoping exercise, it will be possible to estimate the size of the elder abuse issue in WA and to comment on the capacity that existing agencies have to address this crime. This information will inform elder abuse prevention practices for a number of local agencies and the results of this research will

allow key agencies working with elder abuse to improve their responses to the issues and to address perceived gaps in the current processes.

This research is funded by a Lotterywest Research Grant and is being conducted by a University of Western Australia research team working in partnership with Advocare Inc.

As part of this project, you are being asked to participate in an interview with the researchers to outline your views on issues and challenges facing your agency with respect to elder abuse. As suggested above, practitioners from other APEA: WA alliance agencies will be undertaking the same interview process.

In addition to producing a locally-focussed report designed to reduce elder abuse in WA, at the completion of the project findings may be presented at relevant conferences and published in appropriate academic journals. All the responses that you provide will remain confidential and will only be used for the purposes of establishing the key issues, challenges and possible future directions for the responding to elder abuse in Western Australia. With your consent the researchers will make digital audio recordings of the interview and they will also take notes during the interview. Following the interview the written comments will be stored in a locked filing cabinet and the digital audio files will be stored on password-protected computers. Only members of the research team will have access to the notes and audio files. The anonymity of all participants will be safeguarded at all times throughout this research and no individual will be identified as the source of any comments or opinions in any report, presentation, or publication of these research results.

Your participation in this research is voluntary. You do not need to answer any question during the interview unless you wish to do so. You are also free to withdraw your participation from the interview at any time without prejudice in any way. If you do choose to withdraw from participation in this research all record of your involvement will be destroyed.

Disclaimer:
Your participation in this study does not prejudice any right to compensation, which you may have under statute or common law.

Questions:
If you have any further questions about the research please contact either or Research Assistant Professor Joe Clare at joe.clare@uwa.edu.au, Professor Mike Clare at mclare@cyllene.uwa.edu.au, or Dr Barbara Black at **********@hotmail.com.

Complaints:
The research will be conducted in accordance with the National Statement on Ethical Conduct in Human Research. If you have any complaint regarding the manner in which this research project is conducted, it may be given to the researcher or, alternatively to the Secretary, Human Research Ethics Committee, Registrar's Office, University of Western Australia, 35 Stirling Highway, Crawley, WA 6009 (telephone number 6488 3703).

Thank you

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Appendix 4

Examination of the Extent of Elder Abuse in Western Australia: A Qualitative and Quantitative Investigation of Existing Agency Data

CONSENT FORM

I _____ have read the information provided and any questions I have asked have been answered to my satisfaction. I agree to participate in this activity, realising that I may withdraw at any time without reason and without prejudice. I understand that if I do choose to withdraw my participation in this research, all record of my involvement will be destroyed.

I am aware that all information provided is treated as strictly confidential and will not be released by the investigators. The only exception to this principle of confidentiality is if documents are required by law. I have been advised as to what data is being collected, what the purpose is, and what will be done with the data upon completion of the research.

I agree that research data gathered for the study may be published provided my name or other identifying information is not used.

Name   _____

Signature _____

Date: _____/_____/_____

(Please note that as this document is not a contract between parties, it is not necessary that the researcher sign it. Nor is it necessary to have a witness.)

The Human Research Ethics Committee at the University of Western Australia requires that all participants are informed that, if they have any complaint regarding the manner, in which a research project is conducted, it may be given to the researcher or, alternatively to the Secretary, Human Research Ethics Committee, Registrar's Office, University of Western Australia, 35 Stirling Highway, Crawley, WA 6009 (telephone number 6488-3703). All study participants will be provided with a copy of the Information Sheet and Consent Form for their personal records.

Appendix 5

Dear [name],

Myself, along with Professor Mike Clare and Research Assistant Professor Joe Clare of the Crime Research Centre at the University of Western Australia, are currently undertaking some research into Elder Abuse in Western Australia. The research is entitled - ' Examination of the Extent of Elder Abuse in Western Australia: A Qualitative and Quantitative Investigation of Existing Agency Data' and is concerned with looking at qualitative and quantative information held within the major organisations dealing with Elder Abuse in WA. I have attached the research information sheet for your further information about the project.

We are currently seeking to hold a focus group for people working in HACC organisations about their views and experiences of working with Elder Abuse.

The focus group will be held at 4pm on Wednesday 13th of October at the Social Work Department at the University of Western Australia.

Afternoon tea will be provided.

For further information, or to register your interest in attending, please contact me on 04** *** *** or ********@hotmail.com.

Kind regards,

Barbara Black
Research Associate
BSW (hons), PhD

Ph: 9*** ****
mobile: 04** *** ***

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Appendix 6

Examination of the Extent of Elder Abuse in Western Australia: A Qualitative and Quantitative Investigation of Existing Agency Data

INFORMATION SHEET – FOCUS GROUPS

Chief Investigators:

Research Assistant Professor Joe Clare, Professor Mike Clare, and Dr Barbara Black

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Barbara Black	Email **********@hotmail.com
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The aim of this research is to synthesise qualitative and quantitative information from organisations and professionals working with elder abuse in order to provide a coherent, consistent estimate of the extent to which elder abuse is occurring in WA. This research will involve: (a) a literature review, (b) interviews with practitioners from each of the Alliance for the Prevention of Elder Abuse: WA agencies, (c) analysis of relevant quantified, de-identified agency data held across organisations, and (d) focus groups, composed of service providers from non-APEA: WA organisations that also come into contact with elder abuse issues. Through completion of this scoping exercise, it will be possible to estimate the size of the elder abuse issue in WA and to comment on the capacity of existing agencies to

address it. This information will inform elder abuse prevention practices for a number of local agencies and the results of this research will allow key agencies working with elder abuse to improve their responses and to address perceived gaps in the current processes.

This research is funded by a Lotterywest Research Grant and is being conducted by a University of Western Australia research team working in partnership with Advocare Inc.

As part of this project, you are being asked to participate in a focus group with the researchers to outline your views on issues and challenges facing you and your agency with respect to elder abuse.

In addition to producing a locally-focussed report designed to reduce elder abuse in WA, at the completion of the project findings may be presented at relevant conferences and published in appropriate academic journals. All the responses that you provide will remain confidential and will only be used for the purposes of establishing the key issues, challenges and possible future directions for the responding to elder abuse in Western Australia. With your consent the researchers will make digital audio recordings of the focus group and they will also take notes. Following the focus group the written comments will be stored in a locked filing cabinet and the digital audio files will be stored on password-protected computers. Only members of the research team will have access to the notes and audio files. The anonymity of all participants will be safeguarded at all times throughout this research and no individual will be identified as the source of any comments or opinions in any report, presentation, or publication of these research results.

Your participation in this research is voluntary. You do not need to answer any question during the focus group unless you wish to do so. You are also free to withdraw your participation at any time without prejudice in any way. If you do choose to withdraw from participation in this research, all record of your involvement will be destroyed.

Disclaimer:
Your participation in this study does not prejudice any right to compensation, which you may have under statute or common law.

Questions:
If you have any further questions about the research please contact either or Research Assistant Professor Joe Clare at joe.clare@uwa.edu.au, Professor Mike Clare at mclare@cyllene.uwa.edu.au, or Dr Barbara Black at **********@hotmail.com.

Complaints:
The research will be conducted in accordance with the National Statement on Ethical Conduct in Human Research. If you have any complaint regarding the manner in which this research project is conducted, it may be given to the researcher or, alternatively to the Secretary, Human Research Ethics Committee, Registrar's Office, University of Western Australia, 35 Stirling Highway, Crawley, WA 6009 (telephone number 6488 3703).

Thank you

Appendix 7

Organisation perceptions of, and responses to, the needs of vulnerable groups in the community: responses to interview questions not included earlier in the report.

Question 7 – Examples of cases that 'fall through the cracks'

A considerable number of explanations were offered about cases of possible elder abuse which are not followed up. The reasons presented below are important for any review of the definition of elder abuse and the effectiveness of the statutory and voluntary services sufficient to address the complex issue of elder abuse in the current network of service responses:

- Agencies may have elder abuse policies and protocols in place, but these may not be translated into practice.
- Clients may not fit within the agency mandate because of the specific funding criteria; this would require re-referral to an appropriate agency
- There may be other issues that the client presents with that fall outside of the agency mandate for example, concerns about a person's needs, risk and capacity would require referral to Advocare, the State Administrative Tribunal, the Office of the Public Advocate or the Older Persons' Rights Service.
- Not enough manpower or hours to devote to the issue (agency policy) with a
- lack of service availability or none offered which amounts to service neglect
- Lack of evidence in an initial investigation, so case is not taken up and nothing happens until it returns a few years down the track.
- Competency issues when a person is assessed as competent wrongly with implications for the quality of agency training in needs and risk assessment.
- When there is no evidence of incapacity, so that agencies mandated in this area cannot intervene.
- A client may not fit clearly within one agency's mandate, and there may be another agency that should be involved – leading to difficulties in deciding who is best to help. There can also be a context of 'turf wars' and 'passing the parcel' between agencies. Understanding the inter-agency referral system is core knowledge across the sector given that no agency has the mandate for everything.
- No evidence or leverage (police and legal services). Sometimes there is a lack of evidence of wrongdoing; the paperwork is in order but there is also a 'gut feeling' that something is not right.. This leads to a correct decision because statutory action is not justified, e.g., cannot press charges.

- Clients not wanting to take action against relatives and friends – and If it is not reported, there is no way of knowing whether abuse was occurring

- Clients lack of emotional energy to take action

- Prohibitive cost of legal action

- Agency's finding out about financial abuse after it has been occurring for a while, so by that time the majority of the money is gone and is difficult to recover without much evidence, leverage, no police action. – eg. lack of ATM photo records after 3 months.

- The State Administrative Tribunal service obligations require notices to be personally served - this can lead to delays if the person cannot be found.

- Police may not investigate or take action in cases where there is not much evidence or the amounts are relatively small.

Question 8 – Do you believe that your organisation has the capacity to respond effectively in cases of elder abuse? Why or why not? What is your evidence for this?

This question produced the greatest range of responses – from a number of more specialist agencies expressing the positive view that the agencies are dealing with this complex issue through to concerns about mandate and funding,

> *One could always have more resources in any area of human services, in my experience, and it's just the subject of on-going issues in terms of the budget process around looking at appropriate resourcing for the demands coming through the door (Interview 4)*

Question 10a – Does you organisation have the capacity to respond effectively to people experiencing elder abuse from vulnerable groups such as Aboriginal and Torres Strait Islander peoples?

Responses to this question about an agency's capacity to respond to the needs of vulnerable older Aboriginal and Torres Strait Islander people were evenly mixed.

- Reasons for positive views included:
  - Provision of specific Aboriginal service
  - Availability of specific and targeted literature
  - Cultural awareness training
  - Specific policies and strategies
  - Recently increased the number of ATSI people doing investigations or appointed as Guardian
  - Recent public education about Enduring Power of Guardianship
  - Use interpreters and video-link
  - Will travel to rural and remote areas when required
  - Have special unit responsible for training recruits and providing advice or referral

- Have access to Aboriginal community liaison staff
- Reasons for negative views included:
  - Isolation of vulnerable Aboriginal in remote areas*
  - Need to work through local agencies
  - Unable to appoint an ATSI member on the committee
  - Cannot recruit an Aboriginal policy officer
  - Cultural issues of wealth-sharing versus protection of assets*
  - Do not get a lot of ATSI clients* – and need a different strategy to respond too their concerns
  - Specific issues of pension cheques, accommodation, physical violence
  - Aboriginal people are very guarded about engagement – intrusive on family
  - Different cultural understandings
  - Hamstrung by understandings of culture
  - Institutionalised racism
  - Private family business*
  - Re-traumatising to become involved with government agencies (Stolen generations)
  - Have to build rapport – can take a long time
  - ATSI people from outside the Perth metro area can reject services eg HACC
  - Have done more community education but are getting fewer referrals

Question 10b – Does you organisation have the capacity to respond effectively to people experiencing elder abuse from vulnerable groups such as from CALD backgrounds?

The pattern of responses to this question about people from CALD backgrounds was more positive including:

- Have two staff members that speak other languages and we use TISC. Have brochures in different languages
- Provide education to CALD services
- Have developed strategies in terms of developing brochures for CALD people, but have resourcing issues.
- Have the capacity, as work on a grass roots level and have lots of contact with people from CALD communities
- Do 80+ education sessions in CALD communities a year.
- Agency staff are experienced at working with CALD people
- Challenges with cultural expectations of family members staying at home
- Second generation migrants are quite culturally integrated, so not difficult to work with.

- Provide cultural training to staff and use interpreter services.
- Cultural differences about who did what within a family between males and females sometimes
- Do not have difficulty engaging CALD people as they more than likely have English-speaking kids
- Always issues with interpreting but not for lack of engagement.
- Have Indigenous and Community Diverse Unit, which is an access point for advice and information.
- Do have the capacity to act appropriately and sometimes very quickly if necessary.
- Reasonable amount of abuse reported within the Chinese-Asian population, but people might not open up about it as shame is another issue.

    However, there were some cautionary observations:

- Cultural and experiential issues relating to having no rights in their home countries
- Clients with English as a second language and as cognitive impairment increases they have less capacity in English.
- Have few Asian clients, but lots of middle European ones
- Probably do not know enough about how the elderly get abused in all forms – some ethnic groups are closed to us
- Often kept inside the family –

    The nature of immigration is you become that rock of a family, or that rock that nothing goes outside because you need to be…there isn't the support network for you, so whatever's in the family is sacred and held, and it's very difficult to get through to those sorts of agendas (Focus Group One).

- Difficulties of getting the story from people about the abuse because of interpreter issues.
- Issues with deafness and telephone interpreters
- Deaf people often feel excluded because they are often forgotten about – have their own language and culture
- Use very simple language in brochures to be translated
- Cultural mores of caring for older relatives, some don't want to put them into aged care facilities in some cases where it may be detrimental to their health to be living at home.

Question 10c – Does you organisation have the capacity to respond effectively to people experiencing elder abuse from vulnerable groups such as people living with physical and/or mental disabilities?

This question generated the most consistent and the least volume of the responses in the interviews – perhaps because of the specialist nature of the needs of the vulnerable older person?

- We work with other specialist agencies
- Most clients have some physical or mental disability, as this often comes with age
- Can be challenges when the alleged perpetrator is living with a 'mental illness', with dependency on their older parents who feel responsible.
- Representatives from Mental Health and DSC on committee
- See clients in both categories. Some have dual diagnosis.
- Client group main focus of our agency
- Our main client group is people who lack mental capacity
- Have cases involving people with mental health issues (presumably disabilities as well)
- The agency's main client group is people who lack mental capacity
- Role is to look at the particular category – those who don't have capacity
- Officers have knowledge of agencies and resources that can assist
- Perpetrators will be charged regardless – up to judicial system to determine whether person is of sound mind
- Complexity of relationships
- Overriding wishes of disabled person – needs to be education about rights
- Isolated people are at risk – domestic support put in to reduce isolation.
- Assumptions about capacity – that it's consistent throughout the lifespan – can be cyclic
- Staff education on mental health issues
- Dealing with extreme cases of carer health issues with mental health

Question 10d – Does you organisation have the capacity to respond effectively to people experiencing elder abuse from vulnerable groups such as people living in rural and remote areas?

There was a pattern to the answers of this important question; the majority of respondents referred to their agency as a "State-wide service' which included visits by agency staff to the 'country'. However, there are few services outside of the Perth metropolitan area. Both of the focus groups included critical observations:

- There is underreporting in rural and remote because 'You're not supposed to ask for help' and 'You're tough' (Focus Group One).
- 'Systemic abuse' in rural and remote areas by not having services and resources available (Focus Group Two).

    Typical answers to this question referred to:

- We are a WA State-wide service. Make country visits (4 respondents).
- Organisations/work areas in rural and remote are more flexible
- Same CALD diversity in rural populations as in metro
- Country cases mostly handled via telephone
- Country takes more of a 'holistic' approach to the client
- State-wide service. LAC Directorate covers state
- Elderly people in the country are part of community networks and more likely to have informal safeguards around them
- More potential for abuse in closed service system
- Going to link each metro district with a region in the country.
- Doctors to visit periodically and do a clinic. Teleconferencing
- Similar in other states. Only QLD has multiple branches
- Office of the Public Advocate and Public Trustee do not have any presence in regional WA.
- State Administrative Tribunal also based in Perth – distance issue but both will travel if appropriate
- People in rural and remote areas find out about SAT through the health system, ACATs, legal aid, etc.
- Not as many services available, not as many police.
- Investigations expected to be of the same standard, but may not have as many outside agencies to call on to assist.
- Dept of Child Protection and Family and Domestic Violence Units – collocated even in remote areas

    But, further answers included:

- We used to have a Bunbury advocate, now only have a part-time one in Geraldton
- Few care facilities in rural and remote areas
- In-patient stays for rural and remote patients are available if don't have treatment options in the region

- Not able to liaise as effectively with people in rural and remote regions. Don't get to see clients as they are 'in their home'
- Family meetings via video link or telephone, not as effective. A bit less capacity that the issues are addressed.
- Only Albany has an OA Mental Health Team
- Trying to get a team into Busselton/Bunbury region. Issues with people being sent to hospital via ambulance because facilities couldn't manage them. No community follow up = boomerang, just comes back.
- Rural issues are different – can't get health professionals
- Problems with lack of access for rural and remote clients. Are responsible for the State, but only have one office, which is in the metro area
- Don't have the resources

Question 11 – What suggestions do you have about ways that your organisation might respond more effectively to Elder Abuse?

As with the responses to Question Seven, the responses to this question reflected the commitment of professional staff to addressing needs and concerns while also identifying areas for service improvement. The numerous responses tended to cluster in two groups – namely:

- Things our agency could do to improve the situation and
- Things that someone else needs to do to improve the situation.
1. Suggestions of things agencies could do more of included:
    - Need to be resourced to follow thing up – support people through a process
    - Need to train staff in mediation – counsel family / service providers
    - Need a 24 hour service – deal with immediate crisis
    - Could have a 24/7 phone service – older people do not like to leave messages
    - Provide family counselling or mediation
    - Work more closely with agencies in the remote areas
    - Definitely need a policy on elderly carers informed by more research and better data-collection
    - Staff training using relevant scenarios – as with DV
    - Some formal teaching and training on elder abuse – particularly social workers and psychiatrists
    - Push harder in practice for a good outcome – more assertive process
    - Clarify whose role it is to be more direct
    - Lift the profile internally –elder abuse needs a higher profile

- More staff awareness of current policy and procedures – through additional seminars

2. Suggestions for changes needed to improve the current situation for vulnerable older people included:

- Registration and monitoring Enduring Powers of Attorney

- Improve cross-government coordination

- Need a lead government agency / Minister

- Re-visit the Active Ageing Strategy – from the previous government

- Government needs a lead agency – used to have Office for Seniors

- Perhaps a re-definition to get the issue on the public agenda – lift the profile

- Hope for an international conference on elder abuse in Australia but no funding

- Review the Guardianship and Administration Act

- Build in reviews of Administration Orders every 5 years

- More public awareness-raising – public education

- Education of medical professionals

- Education for community groups protect themselves re finance pressures (internet and family) – alert the community

> *...because studies in Queensland in regard to internet abuse of the elderly show that in 2007, I think, people over 55 sent 20 million dollars overseas. Well, in 2009, they sent 29 million, so the same number of people were interviewed, different people, but the same exact number, which shows that there has been an increase of millions, and it hasn't decreased by one cent. So it's a real issue with people sending money overseas, which is a type of...and they only studies people over 55 (Interview Nine).*