

EDUCATION

PREVENTION

SUPPRESSION OF VIOLENCE















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Intruduction

The issue of violence against older people is under-recognised and insufficiently recorded in Croatia, especially considering that one in five Croatian residents is aged 65 years and older. In the context of experience with domestic violence, according to data from the 2020 activity report of the Commission for Monitoring and Improving the Work of Criminal and Misdemeanor Procedure Bodies and Enforcement of Protection against Domestic Violence sanctions, 319 older victims were registered before the courts, which constitutes an increase compared to 2018 and 2019, although the total number of victims is in decline. In 2021, the Ministry of the Interior recorded 760 victims of domestic violence over the age of 65, of which 999 women and 261 men, which constitutes a decrease compared to 2020 [1,095 victims of domestic violence

over the age of 65]. Social welfare centres recorded 289 cases of neglect of older people's needs, which is a slight increase compared to 2019.

What is recognised as a pressing systemic issue is that the existing ways of collecting and publishing available data concerning violence against older people are not systematised and categorised to better understand the very incidence of such violence, such as the structure of the perpetrators [children, grandchildren or partners], forms of violence against older people [e.g., physical or economic violence] and measures taken [sanctions against perpetrators]. In these troubling times, marked by a high rate of femicide in Croatia, and in light of cases of older women who were killed by their sons or people close to them, we

1 Croatian Bureau of Statistics, 202 2 Applied Ombudsman Report for 20 decided to place particular emphasis on preventive action in providing protection and support to older victims of domestic violence

Although older women experience all forms of violence, there is a lack of data on its prevalence, mainly because no recent national surveys have been carried out to collect

such data. This gap in data leads to a lack of safeguard mechanisms and limited victim support services, as well as scarce prevention programmes.

in supporting victims and raising the capacity of relevant

The project puSHEd - Protect, Understand, Support; Help the Elderly to prevent and combat gender-based violence against older women by developing gender-specific responses

project also aims to raise awareness among the general population and improve the community's response to gender-based violence against older women, which primarily implies a higher rate of reporting violence, but also its prevention. The B.a.B.e organisation carries out this project

professionals from the protection and support system. The

in partnership with the City of Zagreb, the Common Path Foundation and the Home for Children and Adults Victims of Domestic Violence "Duga - Zagreb", with the support of the Ombudswoman of the Republic of Croatia, the Victim

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ctured interviews with older women victims of domestic violence, as well as through three focus groups held with professionals working in this field at various levels [institutions, care facilities, public administration, shelters, associations, etc.]. The objective was to map the needs and experiences of older victims, as well as the challenges we are facing as professionals trying to provide adequate support. What we offer in this handbook is information that can help one develop a more sensitised approach in working with older victims of domestic violence, focusing on the needs of older women victims. The handbook specifies the most common forms of violence against older

women and signs to look out for; describes the barriers

rience and relevant data gathered through ten semi-stru- ce for working directly with victims.

This handbook is based on the available literature, expe- that victims face when reporting violence and offers advi-

Violence against older women

Violence against older women is a serious violation of human rights based on deep-rooted prejudices, dehumanising stereotypes and social norms that tolerate and, in some cases, justify violence. The World Health Organization [WHO] defines abuse of older people as "a single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person."

Although older women experience all forms of violence, there is a lack of data on its prevalence, mainly because no research is being carried out to collect them. This gap in data leads to a lack of safeguard mechanisms and limited victim support services, as well as scarce prevention programmes.

Although violence by a partner or family member against an older woman needs to be considered in the context of age and gender, it often remains at the margins between intimate partner violence and violence against older people. For example, the definition of violence against older people only takes into account age, thus minimising the fact that women experience such violence disproportionately. Besides, the debate on intimate partner violence highlights that it is rooted in gender inequality, paying little or no attention to age. For example, the physical and mental effects of violence among older women are more likely to be written off as a normal part of the ageing process.

While intimate partner violence transcends age, this experience is often seen as specific to younger women

or women of childbearing age. When directed against older women, violence becomes invisible and victims' voices are silenced. This problem is exacerbated by inconsistent definitions used by researchers, which may exclude women who consider themselves older but are not recognised as such.

The term "older" can mean different things to different people. This handbook uses the definition of the United Nations, according to which older people are those who are 60 years of age or older.

Older women victims of violence face unique barriers that prevent them from seeking help. Understanding older women victims, abuser tactics and existing systemic barriers

is critical in developing effective responses to the problem of violence in old age.

The shame that older women feel when going through violence, combined with a lack of support services, discourages them from speaking about their experiences. The WHO estimates that only 1 in 24 cases of violence against older people is reported.

The most common forms of violence against older women

Violence by a current or former intimate partner

Physical, sexual, emotional or economic violence or stalking by an individual with whom an individual has a close personal ates a risk of relationship that may be characterised by identifying as a couple, ongoing physical and/or sexual contact and emotional connection (e.g., current or former spouse, boyfriend, dating partner or sexual partner).

An intentional ates a risk of children, a spouse, boyfriend, dating and neglect.

Violence by a family member

Physical, sexual, emotional, or economic violence or neglect that occurs within a relationship based on kinship, dependence, or trust (e.g., violence by adult children, siblings, or other family members).

Abuse by a carer

An intentional act or omission by a carer that causes or creates a risk of injury to an older person (e.g., abuse by adult children, a spouse, or a professional carer). This type of abuse may include physical, sexual, emotional or economic violence and neglect.

Forms of violence and how to recognise it

Physical violence means hitting an older person or handling them roughly even if there is no visible physical injury.

Psychological violence means threatening, insulting, intimidating or humiliating an older person, treating them like a child or preventing them from seeing their family and friends.

Economic violence means deceiving, threatening or persuading an older person to surrender their money or property. Sometimes the abuser can influence and force an older person to change their will or sign a power of attorney, or cash a check without the person's knowledge.

Sexual violence is any sexual act, attempt to perform such an act, unsolicited sexual comment or proposal directed

against an older person and their sexuality, which may be committed by another person regardless of the situation or relationship with the victim.

Neglect implies the denial of care, food and/or emotional support that an older person cannot provide for themselves; failure to fulfil the duties of carer appropriately, whether intentionally or unintentionally.

Cyber violence is any form of violence that occurs through the use of digital technologies and can take place on social media, messaging applications and mobile phones. It involves insults, harassment, sexual remarks and blackmail, as well as impersonation aimed at extorting money from older people.

Risk factors

- isolation (physical, social)
- a history of domestic violence
- dependency on an older adult
- problems with addiction
- depression and other mental health issues
- cognitive impairment

Warning signs

- if an older person tells you that they have been abused or injured believe them!
- injuries such as bruises, sprains, broken bones, scratches; in particular when the explanation does not seem plausible
- changes in behaviour (depression, withdrawal, fear)
- changes in regular social activities, such as absence from church or other social events
- changes in everyday life, such as the sudden presence of relatives who were not previously involved in the care or new friends who are suddenly and actively involved in the person's life
- changes in financial habits, such as cancellation of services (television, telephone or Internet subscription) due to unpaid bills; things "disappearing" from home
- signs of neglect, such as lack of food in the house, being left alone for a long period, lack of necessary aid devices (e.g., glasses, hearing aids), lack of appropriate clothing

Each situation is different, so it may be difficult to determine whether violence is actually taking place. The presence of warning signs does not necessarily mean that violence is actually occurring. Ask questions, seek advice from professionals working with older victims of violence, avoid being judgmental and treat older people with respect. Trust your intuition.

RECOGNISE

- ► Recognise warning signs of violence
- ► Take your concerns seriously.
- Learn to recognise warning signs.

ESTABLISH

- Overcome your hesitation to offer help.
- ► Talk privately with the older person you suspect may be a victim of violence
- Use non-judgmental language.

INVESTIGATE

- Ask auestions.
- Contact professionals working with older victims of violence.
- Check for immediate danger.

IN CASE OF IMMINENT DANGER. IMMEDIATELY CALL THE POLICE AT 192!

Barriers to reporting violence

Intrapersonal reasons

- failure to recognise violence
- denial of violence
- perceived and/or actual consequences of reporting violence (e.g., fear that violence will intensify once reported)
- traditional beliefs and attitudes towards marriage and gender roles
- understanding violence as a private, family issue
- fear of having one's autonomy taken away, forced placement

- in a care facility, deprivation of decision-making rights
- cultural factors (e.g., women's submissiveness to men)
- fear of losing relationships with children, grandchildren, and other family members or friends
- feelings of shame
- apprehension arising from one's social status (e.g., sexual orientation, ethnicity)
- · lack of knowledge about available services
- belief that the services available are intended exclusively for younger women

Interpersonal reasons

- dependency or co-dependency on partner or carer (physical, financial, and/or emotional dependency)
- lack of support from family and/or friends
- minimising violence by family and/or friends

- victim blaming by family and/or friends
- emphasis on the sanctity of marriage and family and gender roles by authority figures [e.g., church]

Physical barriers

- living in a remote place or rural environment; inability to access support services
- lack of a supportive place or supportive network
- functional or physical mobility limitation
- lack of financial resources to access services or transportation
- not owning a phone or mobile phone

Barriers concerning social services

- failure to recognise violence against older women by social service and healthcare providers
- limited research on violence against older women
- stereotypical perception of violence as a problem affecting mostly younger women
- under-recognition of older women's reluctance to talk about the violence they have experienced, and insufficient "follow-up" or risk assessments
- attributing typical signs of violence to ageing [e.g., injuries and health issues]
- lack of facilities and services for persons with disabilities and mobility difficulties
- · lack of specialised support for older women

Suggestions for working directly with older clients who are victims of violence ⁵

The person sitting in front of you has taken the most difficult step of all: she has confided in someone about the abuse they're experiencing. Now she needs your help.

If your client is over 60, the chances are she has been living with the abuser for a long time - perhaps even decades. This might be the first time she has ever asked for help.

Do not assume anything; ask questions instead. Ask the client if she needs help and if she feels safe. Before initiating the conversation, make sure that you are in a safe environment.

Be supportive and listen. The client may not immediately feel comfortable sharing with you the details of the violence she is experiencing. She also may not recognise that what is happening to her is actual violence.

Explain to the client that there is assistance and support available. Encourage her to talk to someone she trusts, if that is not you. Offer to accompany her during that conversation.

Ask her what she wants and what she would like you to do for her and be sure to respect her decisions. Acknowledge

how difficult it is to seek help and leave an abusive environment, while also introducing her to her options.

If no further support is needed, reassure the client that you are there for her whenever she is ready. Always keep the lines of communication open.



Health and mobility issues are affecting the victim's ability to seek help

Older women victims may require more time to obtain the support they need because they cannot easily leave their home or where they live, have no safe place to go to or have no access to a mobile phone. This may be exacerbated by the fact that the perpetrator of violence is also their primary caregiver.

How can I help?

Be flexible in where and how you provide support - hold counselling and outreach sessions at places where older women feel safe or can access more easily [e.g., healthcare facilities]

Meet your client face-to-face whenever possible and ensure any communication meets her needs – for example, using interpreting services for the deaf and hard of hearing.

Visit the client at her home where possible and if you consider that she can freely talk there and arrange visits together with other professionals if their presence is reassuring for your client.

Find out about available capacities in nursing homes, shelters and safe houses for women victims of violence.

Take the time to explain to the client the type of service you provide and how you can help her.





The victim has limited eligibility for housing, legal or financial support

Older women victims might require specially adapted homes to help them live independently. This may limit the possibilities available to them, as medical care is usually not available in safe houses for women victims of violence and nursing homes do not provide legal and psychological support.

Besides, leaving the perpetrator may cause additional (legal) costs as well as costly care options.

How can I help?

Find out about available capacities in nursing homes, shelters and safe houses for women victims of violence.

Find out about local lawyers offering pro bono services. Link them to your client.

Find out about the needs of older people, including information on pensions and benefits available to them.

Contact the local social welfare centre.





The victim does not want to leave the abuser or has issues that make it difficult to do so

Older women victims typically live with their abusers for many years before seeking help. This could mean that it will take them longer to deal with the trauma or leave the abusive environment at all. The victims may also have complex needs such as dementia. This may mean that you will have to work with the client for a longer period.

How can I help?

Respect your client's autonomy and her right to make decisions on her own life. She will leave the abuser when she is ready.

Help your client create a safety plan; find out what she has done in the past to protect herself [and if it still works] and if she has somewhere to go if she needs to escape urgently.

The sense of isolation significantly affects older people's quality of life. Find out if the client is supported within her family and if any activities are offered at the local level in which she can participate.

Finally, provide the client with as much helpful information as possible, while avoiding unverified facts that can overwhelm her. This will help her make informed choices about her future. Where possible, provide information in writing.



The perpetrator is an older person or has health issues of their own

We often encounter cases where the perpetrator suffers from dementia or some other health condition. In such cases, the perpetrator may be perceived as vulnerable and, consequently, the response of the judiciary may be inadequate to protect the victim of violence.

How can I help?

Find out about support services for the "vulnerable" perpetrator; there may be an option to move them out of the home following a diagnosis to protect the victim.

Recognise that your client may feel the need to maintain the relationship and help the abuser. Support her decision while also informing her about her options.



The abuser is the victim's adult child or grandchild

In this case, victims are even less likely to seek help. This is often because they still love their child or grandchild and want to help them. Besides, they may blame themselves for raising them "poorly".

How can I help?

For the above reasons, the options for clients in such cases may be limited. However, wherever possible, you should explore alternative solutions in agreement with your client. For example, it was established that clients find it easier if a neighbour reports the violence to the police. With this in mind, it is possible to agree with the client on a code word that she will use in a conversation with a trusted neighbour when she wants them to call the police on their behalf.

Link in with professionals from the local social welfare center. If the abusive person is under the age of 18, find out if there is a counselor for young people with behavioural issues working at the local level.

It is extremely important to network with other stakeholders within the system of support for women victims of violence. Share information whenever possible and visit the client together if it makes her feel more comfortable. By working together, you will achieve better outcomes and, ultimately, help more older women victims.

Conclusion

In many ways, living with a domestic abuser affects all victims the same, regardless of their age. Every victim worries that they will not be believed or that they will have to live with the stigma of violence. Victims also worry about the financial problems that may arise when they report the abuser, whether the violence will intensify once he is released and, ultimately, what will happen to him once they speak up.

However, for older women victims, this fear may be exacerbated by numerous other factors. As professionals, being aware of these barriers allows us to better understand their fears and, therefore, take a more flexible and creative approach in providing support.

There is no such thing as a "typical" woman victim of violence. However, women or families featured on leaflets and posters and in campaigns are usually younger. For this reason, older women tend not to recognise that they themselves are victims of violence. Besides, this is complemented by a lack of services and resources tailored to the unique needs of older women who are victims of violence.

Due to the generational gap in attitudes towards relationships, some older women may accept violence as a normal part of their everyday life. Older women are less inclined to talk about problems in a relationship or marriage because they usually perceive their role as related to the home, and divorce as a taboo.

This reluctance to talk about violence may lead do intensified victim blaming by the family and the environment, and even by some professionals,

most often because the victim has lived in an abusive environment for a long time ["it cannot be that bad if you stayed with him for so long"].

The degree of support provided to women victims of violence varies depending on the environment in which the victim lives. In some areas, support is much more available than in others. Many older women victims of violence are not at all familiar with available services, especially if they do not use the Internet.

If the violence has been going on for many years, there is a possibility that the victims have already reported it. If they did not receive the help and support they expected, it is not surprising that they have given up on further attempts.

Older women are statistically more likely to have more health issues and limited mobility than younger women, which makes them even more vulnerable. This may also include losing the ability to communicate clearly due to a stroke or heart attack, hearing loss or other chronic diseases, which may lead to physical and social isolation.

Professionals also tend to attribute some of the fundamental signs of violence to the victims' age [e.g., injuries, confusion, depression], so they do not ask the right questions.

Another common barrier for women with health issues is that the perpetrator of violence is also their primary caregiver. This can lead to isolation from other family members and friends, especially in cases where the victim has been dependent on the perpetrator for most of her life.

Adult children, on the one hand, can support their mothers and encourage them to go and seek help. On the other hand, they may also create barriers in terms of letting their older mother know that they want her to stay married and continue to care for the older father. The responsibility women place on themselves to care for an abusive partner or children can also be overwhelming.

Older women are more likely to live in an abusive environ-

ment for a long time. The idea of having to leave the home where they have lived for many years, leaving behind children, pets and valuables, can be too burdensome. Having contributed to their families and homes throughout their lives, they fear that they will lose everything. Besides, victims often feel that it is not the right time to leave home due to certain life circumstances[e.g., death of a family member, birth of a grandchild, retirement].

Violence against older women is under-recognised and under-reported.

Important contacts

B.a.B.e. Budi aktivna. Budi emancipiran.

address: Selska cesta 112a, Zagreb telephone: 01 4663 666

toll-free helpline: 0800 200 144

email: babe@babe.hr web: www.babe.hr

Sigurna kuća Vukovarsko-srijemske županije B.a.B.e. Budi aktivna. Budi emancipiran. telephone: 032 414 910

mobile phone: 098 982 4641 (svaki dan od 0 do 24h)

City of Zagreb Department for Social Welfare, Health, Veterans and Persons with Disabilities

address: Trg Stjepana Radića 1, Zagreb

telephone: 01 610 1271

email: socijalneustanove@zagreb.hr

web: www.zagreb.hr

Home for Children and Adults Victims of Domestic Violence "Duga – Zagreb"

(secret location)

official address: Ozaljska 93, Zagreb

toll-free helpline of the counselling centre for children and adults victims of domestic violence: 0800 88 98

email: savjetovaliste@duga-zagreb.hr

Duga Home - general information: 01 383 1770

email: info@duga-zagreb.hr web: www.duga-zagreb.hr

The Common Path Foundation

Središnji ured address: Miljackina ulica 42a telephone: 01 778 9890 email: zaklada@zajednickiput.hr web: www.zajednickiput.hr

Senior centar Jarun address: Hrgovići 93a email: lea@zajednickiput.hr

Senior centar Donji Grad address: Ulica kralja Zvonimira 17 email: karla@zajednickiput.hr

National Call Centre for Victims of Crime telephone (dostupan 0-24h): 116

telephone (dostupan 0-24h): 116 006 email: npc@pzs.hr web: www.pzs.hr

Ombudswoman

address: Savska cesta 41/3, Zagreb telephone: 01 4851 855 and 01 4851 853 email: info@ombudsman.hr web: www.ombudsman.hr



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