## Sexual Violence and Older Women in Long Term Care: Intersectoral Approaches and Promising Practices

The information and opinions expressed during this weinar are not necessarily those of the Government of Ontario

### Presented by:

Tammy Rankin, Senior Safety Advisor,
 Regional Municipality of Durham Long Term
 Care & Services for Seniors Divison
 &
 Rosalyn Forrester, Community Support &
 Outreach, Interim Place

### Hosted and Facilitated by:

Amber Wardell, Project Coordinator, Aging Without ViolenceRochella Vassell, Regional Consultant, Elder Abuse Ontario

January 22nd, 2019









## **Webinar Welcome**

- All attendees will be muted during the webinar. This session is being recorded and will be posted on EAO website.
- If you are experiencing issues, please type into the CHAT/QUESTION BOX and send message to Mary Mead/Rochella Vassell/Raeann Rideout
- There will be 15-20 minutes allocated at the end presentation for QUESTIONS AND ANSWERS.
- You will be prompted to fill out an EVALUATION FORM once the session has ended. Please fill out the form as your feedback will guide us for our future webinars. You will also receive an email link to the evaluation after the session.
- > Participants will be sent the slides electronically after the webinar
- Speaker CONTACT INFORMATION will be provided at the end of the presentation to connect directly if you have further questions.



## **Learning Objectives**

- Provide participants with an overview of sexual violence against older women
- Discuss the actions and behaviours that constitute sexual abuse, risk factors, and barriers to disclosures;
- Help participants to understand consent and capacity in context of sexual violence
- Clarify the responsibilities of staff to report sexual abuse under LTC Act
- Provide insight of police role in investigation of reports of sexual abuse in LTC homes
- Provide information on intersectoral approaches and promising practices to providing support and care to older women living in LTC homes
- Highlight barriers and strategies for risk management related to sexual violence LTC settings

## Elder Abuse Ontario (EAO)

## Mission:

Create an Ontario where all seniors are free from abuse through awareness, education, training, collaboration, service co-ordination and advocacy.

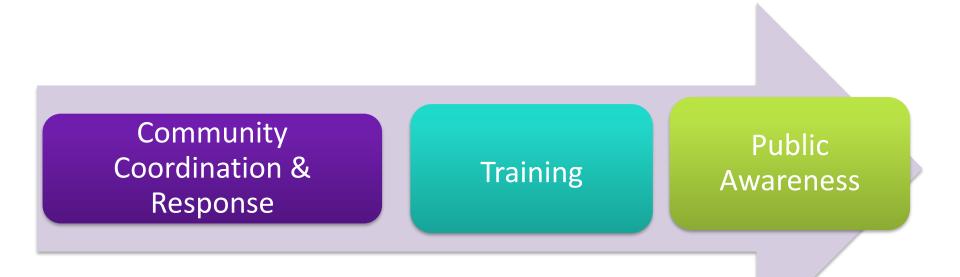
- Not-for-profit charitable organization
- Implemented Strategy in 2002
- Funded by the Province of Ontario, under the Ministry of Seniors and Accessibility

# EAO administers the implementation of Ontario's Strategy to Combat Elder Abuse





## **Elder Abuse Strategy**





EAO's Role In Responding To Elder Abuse

# Elder Abuse Ontario (EAO)

### 7 Regional Consultants in Ontario

(Peterborough, Thunder Bay, Woodstock, Sudbury, Ottawa, Toronto,)

- ✓ 2 Francophone Consultants
- ✓ Support over 40 local Elder Abuse Committees/Networks
- ✓ Offers organizations customized training and education for staff.
- ✓ Performs outreach/education activities for seniors' groups
- Participates in furthering the cause of abuse prevention at conferences and events







## **Tammy Rankin**

Senior Safety Advisor, Regional Municipality of Durham Long Term Care and Services for Seniors Division

## **Rosalyn Forrester**

Community Support and Outreach, Interim Place



## When is it Mandated to Report?

## Long-Term Care Homes Act, 2007 s.24(1)

'any person who has <u>reasonable grounds to suspect</u> that any of the following <u>has occurred, or may occur</u>, shall **immediately report** the suspicion and the information upon which it was based to the Director under the LTCHA'.

This obligation includes family members of residents, staff, owners of the homes, doctors, nurses and other health care professionals under the *Regulated Health Professions Act*.

The Long-Term Care ACTION Line is open 7 days a week, from 8:30 a.m. to 7:00 p.m. 1-866-434-0144





## When is it Mandated to Report?

**Retirement Home Act 2010 s.75. (**1) Anyone seeing or suspecting abuse in a Retirement Home legally obligated to report to RHRA.

This obligation includes family members of residents, staff, owners of the homes, doctors, nurses and other health care professionals under the *Regulated Health Professions Act*,.



### Duty To Report To Registrar

Do you suspect that any of the following has occurred, or may occur, to a resident of a retirement home?

### Harm, or risk of harm, resulting from:

- Improper or incompetent treatment or care
- Abuse of a resident by anyone
- Neglect of a resident by staff of the retirement home
- Unlawful conduct
- Misuse or misappropriation of a resident's money

If so, you must report it to the **Registrar of the Retirement Homes Regulatory Authority** along with any other relevant information.

To make a report, call: **1-855-ASK-RHRA (275-7472)** or write to the RHRA at: info@rhra.ca or 160 Eglinton Avenue East, 5th Floor, Toronto, ON M4P 3B5

You may report anonymously. The *Retirement Homes Act, 2010* protects people who report or provide information to the Registrar from any retaliation.

The failure of certain persons to make a report is an offence under the Act.

## **Rights of Older Adults**

- Dignity and Respect
- Autonomy Independence
- Access to Information
- Privacy
- Freedom
- Confidentiality
- Safety and Security
- Basic Requirements for Life
- All rights under the Ontario Human Rights Code





## **CNPEA Sexual Violence Project**

Increasing Access to Justice for Older Victims of Sexual Assault (Project runs until 2020). The aim of the project is to provide new training and learning for service provider and to gather, curate and synthesize an up-to-date array of resources and materials about sexual assault of older adults.

CNPEA has so far released one <u>literature review</u> and one <u>research snapshot</u>. Work so far has confirmed our hunch that there is not a lot of research in Canadian context, but we will also be looking at resources from other parts of the world.







**CANADIAN NETWORK** for the **PREVENTION** of **ELDER ABUSE** 

## **CNPEA Sexual Violence Project**

- The Literature review is large document, so we will soon produce a handful of Learning Briefs to break down the main points of the Review. and make the information more approachable.
- Research Snapshots are designed to highlight specific articles (1 article per Snapshot), related to the topic. The first Research Snapshot summarized the article, "*Resident-to-resident abuse: A scoping review*" (McDonald, L., Sheppard, C., Hitzig, S.L., Spalter, T., Mathur, A., & Singh Mukhi, J -2015- Canadian Journal on Aging, 34(2), 215-236.)
- More snapshots, and a second literature review are currently being developed and will be released in the first part of 2019.







**CANADIAN NETWORK** for the **PREVENTION** of **ELDER ABUSE** 

## **CNPEA Sexual Violence Project Webinars**

- Webinars available on <u>CNPEA site</u>, along with the slides in English and in French.
- CNPEA is currently planning to host their next webinar in winter 2019.
- Theme and presenters TBD CNPEA always welcomes suggestions for themes and presenters. Anyone interested in participating or wishing to share their recommendations can contact: Benedicte Schoepflin at <u>benedictes.cnpea@gmail.com</u>





## Aging Without Violence (AWV) Project: AGING WITHOU



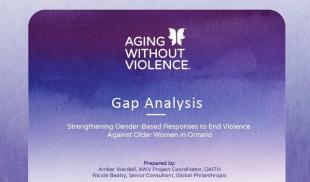


### The Aging With Confidence

Action Plan for Seniors includes dedicated efforts to address violence against older women, under the Strengthening Elder Abuse Prevention section.

### January 2018 - March 2021

- Funded by the government of Ontario,
- Sponsored by OAITH
- Guided by an intersectoral provincial advisory
- Focused on ending violence against older women across Ontario by increasing the capacity of service providers and public awareness



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I am a friend or far	old	er women in Ontario (Jan.					
Femicide in Ontario		The Aging Without Violence (AWV) project is guided by an inter-sector provincial advisory including stakeholders with expertise in violence against older women, public education, service provider training, research, and improved community responses.					
Past OAITH Initiative	s Goa	als of the AWV project incl	ude:				
Submissions	• s	howcasing existing respo	nses, programs and researc	h in the area of old	er women who've expe	rienced violence	
Find your MPP			connect across the VAW, he				

## www.oaith.ca

Identifying gaps in service delivery, resources, systems and research to inform specific service provider training

### Published July 2018

### **Word to the Wise- Monthly Factsheets**





What barriers do older women experience when accessing services and supports? Aging Without Violence research participants reported on why they believe older women experiencing violence do not access servicers

- Believes it is a personal matter (3-18)
- Feels there is no ourcose in getting help flength of abuse) (3160 She is not aware of the available services (1990)

PAIT

Pontario

www.oaith.ca

5% Age 40+

What ones "older" mean?

201 Age 50+

Gender-neutral terms contribute

Why use the term "Violence Against Older Women?"

The context of gender when recognizing and responding to violence against older section.

By using the arm Violence Against Older Women (VAOW) is research, policy, and practice when that the general results terms of relder source on age neutral terms of themaly violence or related to the control of the control or related to the control or

Types VAOW may include: physical abusia sexual douse, regloct, financial abuse, spritual douse organizacji externet/one/Averael abuse and statking.

The importance of or Intersectional approach which considers systemic oppression including applian racian and scalar

17% Aga 60+

(1% Other

rather than "Elder Abuse" or "Family Violence"?

Implications of ading related to women's experiencer or vicience

to the invisibility of violence

against older women

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Close to include a start wider to vestigate and R4, Addrey Without wider to vestigate indicates 55% as the most common age connected with the term "older".

become "older?"

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#### Why is an intersectional approach important when working with older women?

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to meet the needs of older women experiencing violence

### Helpful Resources

### Native Women's Association of Canada- NWAC

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**ØAITH** 

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Free From Harm: Toware a Rest Proctices Guide, sectors Alasse of Divisit Wences s an international network of researchers, into ners and studients died ontrod to oving the care of older adults, both in National Clearinghouse on Abuse

### Later in Life (NCALL)

s include information poolders for older single onchra abuse, toolders for carrighters care, egs. Information and resources for onto minis of hish percentifikers. Respect ROPE: Evilating to Older People Collection of publications and resources to help obtains bodies uncerstand and respond to abuse interimities. Advantation looks how to most the reside of skiller survivors of abuse. ting Aging and Vienen Abure A response and a response working with other women





risk is vital in supporting older women

What is important to know about capacity issues when working with older women experiencing violence?

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# What services in the VAW sector have you referred to, provided information regarding, or collaborated with while assisting an older woman?

(if yes to A-D, choose the option you refer to/collaborate with most commonly)

A –local shelter/women's services counselling or transitional support programs

B- local shelter/women's services crisis line

C- provincial crisis line (such as senior safety line, assaulted women's helpline, Fem'Aide, or Talk 4 Healing)

D- services from your local sexual assault centre (counselling, advocacy, crisis line)

E- None of the above- I was not aware of this range of services

### **Overview of Violence Against Women** (VAW) Services in Ontario



VAW services are delivered through more than 100 organizations across Ontario, and include:

- emergency shelters
- crisis and support services
- counselling services
- housing support services
- transitional support services, and
- province wide crisis help lines

If you are a woman experiencing abuse, there is someone you can reach out to any time of day or night.



### www.sheltersafe.ca

### Get Help Now

Seniors Safety Line (SSL)

The SSL provides contact and referral information for local agencies across Ontario that can assist in cases of elder abuse. Trained counsellors also provide safety planning and supportive counseling for older adults who are being abused or at-risk of abuse. Family members and service providers can also call for information about community services.

Seniors Safety Line: 1-866-299-1011

### Assaulted Women's Helpline (AWHL)

AWHL is a anonymous and confidential 24-hour telephone and TTY crisis telephone line to all women in the province of Ontario who have experienced any form of abuse. AWHL provides crisis counselling, safety planning, emotional support, information and referrals accessible 7 days a week, 365 days a year.

Deaf, deaf-blind and hard of hearing services are available 24 hours a day, 7 days a week.

Assaulted Woman's Helpline: 1-866-863-0511 TTY: 1-866-863-7868

### Talk 4 Healing

Talk 4 Healing is a free and culturally safe telephone help line for Aboriginal women living in Northern Ontario.

1-855-554-HEAL

### Fem'aide

Fem'aide is a provincial crisis line confidential services for Francophone women who are victims or survivors of any form of violence or are in distress, providing crisis intervention, support and referrals to community agencies. Fem'aide: 1-877-336-2433 (1-877-FEMAIDE) TTY: 1-866-860-7082

### **Overview of VAW Services in Ontario- con'd**







The Network



35 Centres Across Ontario

585 Staff

www.sexualassaultsupport.ca

### www.sadvtreatmentcentres.ca

## How can older women in LTC be supported by VAW services?



- Provide a safe, confidential space to connect with a local or provincial crisis line
- VAW services can provide support related to historical or recent trauma (even if not fully recalled)
- Provide information from VAW services in an accessible format
- If mobility issues permit, arrange for counselling appointments or ask if phone/virtual support is possible
- THSP could attend and meet with her within LTC home if services are needed
- Collaborative meeting to manage risk (assess risk, create safety plan, coordinate with perpetrator services)
- Training from VAW staff for LTC staff and vice versa; increase capacity

### www.oaith.ca

Amber Wardell – Project Coordinator: amber@oaith.ca

# Sexual Assault in Long Term Care

Trends, Consent and Capacity

# Sexuality and Older Adults

Need for intimacy doesn't decline with age

- What some psychologists term "skin hunger" (also known as touch hunger) is a need for physical human contact. Although many people sate their skin hunger through sex, skin hunger isn't exactly a sexual need
- Basic human need (arguably a basic human right)

# Intimacy and Sexuality

Intimacy and sexuality are important aspects of life and can play a significant role in the development of one's identity, self-esteem, and relationships throughout the lifespan.

Intimacy and sexuality include touch, tenderness, warmth, companionship, sexual expression, sexual activity, and diversity in gender identity and sexual orientation.

# **Decision Making**

- Capable people make decisions for themselves
- Capable people are able to make poor choices – does not mean incapable
- Many factors influence ability to make decision making

## **Cognitive Capacity**

Decision making capacity is assessed in relation to each individual situation

Assessment is made related to ability to understand basic information, ability to appreciate consequences of the decision and the ability to communicate and express a choice

A person may have cognitive impairment in areas unrelated to intimacy and sexual choice, e.g., financial planning, and still maintain capacity to make intimacy and sexuality choices

# Trends

- Long Term Care Issues Resident to Resident Assaults (capacity issues), Resident to Resident – Sexual Offenders, predatory behaviour
- Domestic sexual assaults -cohort effect
- Sexual Assaults caregiver or other

# Supreme Court Finding

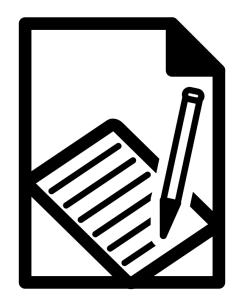
R v JA 2011 SCC 28 is a criminal law decision of the Supreme Court of Canada regarding consent in cases of sexual assaults. ... If a person becomes unconscious during the sexual activity, then they legally cannot consent, whether or not they consented earlier.

## **Resident to Resident**

- Various types of dementia cause decrease in inhibitions
- Results in WANT becoming a NEED
- Responsive Behaviours
- Response Behaviour Supports Ontario (BSO)

## Mandatory Ministry of Health Reporting

- A Critical Incident Report must be submitted immediately
- Police are to be notified directly.
- Where aggravated assault is suspected, staff are not to wash or change the clothing of the person(s) involved.



# Increasing reports to MOH and Police

- Why? Trigger words in reporting
- "caught"
- "inappropriate"
- Personal values and beliefs influence language and reporting
- "are the residents married?"
- "not engaging in normal sex"
- Gender bias victim and accused

# **Unnecessary Intrusion**

- Mr. B and Miss P
- Developed intimate relationship in care setting
- Ethics review they wanted to share a room...and THEY WEREN'T MARRIED
- Her previous lifestyle and his previous lifestyle come into consideration
- Moral distress of his family
- Her inability to verbalize stroke

## Sexual Offenders in Long-Term Care

- Care facilities are not permitted to ask for criminal record checks
- People with criminal history also age historic behaviours might continue
- Vulnerability of population in care settings increased risk of victimization

# R v F - 72 year old male

- Independently mobile, physically strong, early dementia
- Sexually assaulted 5 female co-residents, all with dementia and physically frail
- Charged and got probation
- Discovered previous history of sexual assaults throughout life span – sexual predator
- Not required to disclose criminal history when moving into care facility

# Mr. S - 80 year old male

- Mild dementia, Parkinson's, independently mobile (note: shuffling gait)
- Barricaded a room door and sexually assaulted female co-resident with advanced dementia
- Deliberate, targeted, behaviour
- Discharged from the facility undergoing psychiatric evaluation

# **Retirement Home**

- Female resident 50 years old history of traumatic brain injury from teen years
- Historically cared for and sheltered by parents
- Vulnerable and naïve
- Admitted to RH following death of parents behaved like a teen with complete freedom
- Sister had capacity assessed by assessor under the classification of safety

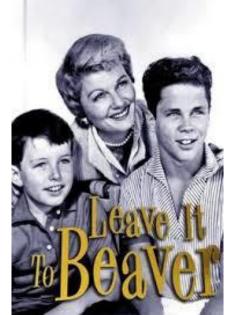
## **Domestic Sexual Assault**

- Domestic throughout the life span frailty increases risk
- Physical frailty can increase safety risks related to sexual intercourse
- Domestic/ Dementia

# Part of Mainstream Culture







## **Cohort Context**

- Born before 1951
- A woman's right to work, right to vote, independence
- Historically marital vows "love, honor and obey"
- Marital rights / "property" root of taking married name
- "Rule of Thumb"

## Historic Relationship

- Female in care advanced Alzheimer disease
- Supportive and (evidently) caring spouse visits daily
- Spouse witnessed by staff masturbating at bedside of wife
- Seemingly unaware and unaffected
- What should be done, if anything?

### Sexual Assaults by Others

- Family
- Staff

### Personal Care

- Female resident with dementia
- Adult son primary caregiver prior to admission
- Focus on preventing urinary tract infections
- Treatment with regular douching



- GTA hospital didn't notify police about allegations seniors had been
- sexually assaulted
- Personal support worker was fired and later charged by York Regional Police
- Shojaadin Mohammad-Zadeh, 51, was charged with one count of sexual assault



### **Obstacles to Investigations**

- Staff cleaning up evidence staff in care settings are likely to provide peri care to resident prior to calling police
- Slow reporting times not knowing what they see (bruising, bleeding, etc.)
- Historically investigations in silos

# Tammy Rankin

Senior Safety Advisor Long Term Care & Services for Seniors The Regional Municipality of Durham (905) 668–4113 Ext. 2460

Tammy.Rankin@durham.ca

# **CASE STUDY**

## **Emerging Themes**

- LGBTQ seniors fear renewed discrimination in long-term care
- A Fate Worse than Death? Being Trans in Long-term Care
- "Hiding who I am" The reality of end of life care for LGBT People
- Supporting Lesbian, Gay, Bisexual, & Trans Inclusivity in Long-Term Care Homes:

### Resources

Rainbow Health Ontario Doctor Mentoring Program and Trainings:

https://www.rainbowhealthontario.ca/trans-health/

City of Toronto Long-Term Care Homes & Services Tool Kit (via Rainbow Health Ontario)

https://www.rainbowhealthontario.ca/wpcontent/uploads//woocommerce\_uploads/2018/06/2017-LTC-Homes\_\_Services\_LGBT\_Tool-Kit\_.pdf

SAGE U.S Recourses on Aging an LGBT <a href="https://www.sageusa.org/your-rights-resources/lgbt-aging/">https://www.sageusa.org/your-rights-resources/lgbt-aging/</a>

EGALE Canada https://egale.ca/seniors/

#### **SPRINT Senior Care Guide**

https://sprintseniorcare.org/sites/default/files/documents/SPRINT %20Senior%20Care%20Older%20LGBT%20Toolkit%20-%20Rebranded%20FINAL%20-%20November%202013.pdf



My guide to caring for trans and gender-diverse clients

does your journey begin?



### **Rosalyn Forrester**

### Community Support & Outreach Interim Place (905) 403–0864 ex. 2261 rosalyn@interimplace.com







Elder Abuse Ontario http://www.elderabuseontario.com/ (416) 916-6728

Seniors Safety Line: 1-866-299-1011

Ontario Network of Sexual Assault/ Domestic Violence Treatment Centres <u>www.satcontario.com/en/home.php</u> (416) 323-7518

#### Victim Support Line

www.attorneygeneral.jus.gov.on.ca/eng lish/about/vw/vsl.asp 1-888-579-2888 Assaulted Women's Helpline www.awhl.org 1-866-863-0511

Call your local Police Force by Dialing 911

#### **Ontario Provincial Police**

www.opp.ca 1-800-310-1122 Various local/ municipal contact information depending on location

Ontario Coalition of Rape Crisis Centres http://www.sexualassaultsupport.ca/

#### TALK4HEALING

http://www.talk4healing.com/ 1-855-554-HEAL (4325)

**Rainbow Health Ontario** 

http://www.rainbowhealthontario.ca/ (416) 324-4262 Fem'aide http://www.femaide.ca/ 1-877-336-2433

Support Services for Male Survivors of Sexual Abuse

http://www.attorneygeneral.ju s.gov.on.ca/english/ovss/male support\_services/ 1-866-887-0015

#### **Senior Crime Stoppers**

http://ontariocrimestoppers.ca 1-800-222-TIPS (8477)

#### Advocacy Centre for the Elderly

www.advocacycentreelderly.org 1-855-598-2656

#### **Alzheimer Society of Ontario**

www.alzheimer.ca/en/on 1-800-879-4226

#### Law Society Referral Service www.lsuc.on.ca/lsrs/

1-855-947-5255

### Office of the Public Guardian and Trustee

www.attorneygeneral.jus.gov.on.ca 1-800-366-0335

Retirement Homes Regulatory Authority

<u>www.rhra.ca</u> 1-855-275-7472

Ministry of Health and LTC-Action Line <u>www.ontario.ca/page/long-term-</u> <u>care-home-complaint-process</u> 1-866-434-0144 LHIN Home and Community Care <a href="http://healthcareathome.ca/">http://healthcareathome.ca/</a>

#### **Consent and Capacity Board**

<u>www.ccboard.on.ca</u> 1-866-777-7391

### Questions?





### Stay in touch with us!









### **Questions and Answers**



Please fill out the EVALUATION FORM as your feedback will guide us for our future webinars.

You will receive an email link to the evaluation after the session.



### **CONTACT ELDER ABUSE ONTARIO**

#### **EAO Head Office**

2 Billingham Rd, Suite #306 Toronto, ON M9B 6E1

Tel: 416-916-6728 Email: <u>admin@elderabuseontario.com</u>

Website: www. elderabuseontario.com

#### **Regional Consultant Offices**

Rochella Vassell Central West Consultant, Tel: 416-916-6728 Ext. 225 Email: centralwest@elderabuseontario.com

Raeann Rideout Central East Consultant, Tel: 705-876-1122 Ext 327 Email: centraleast@elderabuseontario.com





### Contact the Aging Without Violence Project

### **Amber Wardell**

Project Coordinator (416) 977-6619 ex. 104 <u>amber@oaith.ca</u>



Stay informed about our future webinars and training opportunities

AGING WITHOUT VIOLENCE.

### **THANK YOU!**







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