

November is Women Abuse Prevention Month

Older Women, Gender-Based Violence and Femicide in Ontario

November 16, 2021

1:00 – 2:30 PM



Free Webinar

Featured Speaker:

Amber Wardell

*Communications & Resource Coordinator,
Ontario Association of Interval and Transition Houses*



www.eapon.ca



Victims and Survivors of Crime Week

@EApredventionON



Information and opinions expressed here today are not necessarily those of the Government of Ontario



LAND ACKNOWLEDGEMENT

WEBINAR HOUSEKEEPING



Communication

All attendees will be muted during the webinar.



Speakers

Will be visible while presenting and for the Question/Answer session.



ASL Interpreters

Image and name of Interpreters will be visible during the webinar.

You can view all speakers by clicking gallery view.



Adjusting Speaker Images

Drag the line between the image frame and slides to the left (adjust at beginning of the webinar).

WEBINAR HOUSEKEEPING



Chat Box

Post comments during the session.



Question Box

Type your questions in **Question/Answer box**. A response will be posted during the webinar *or* asked to speaker after the presentation.



Recording

A recorded version of this webinar will be available on EAPO's website.



Evaluation

After the session, a pop-up screen will appear to complete survey. Your feedback and suggestions for future webinars is appreciated.

WEBINAR HOUSEKEEPING

Respecting Privacy and Confidentiality

EAPO appreciates there may be personal circumstances or issues which participants may wish to address. However, in keeping with our commitment to maintaining your privacy and confidentiality, today we will be answering general questions posed through the Q&A.

If someone wishes to discuss specific circumstances, we invite you to contact EAPO following this webinar to arrange for a confidential conversation so that we may further assist you.



Elder Abuse Prevention Ontario (EAPO)

Mission and Goals

EAPO envisions an Ontario where ALL seniors are free from abuse, have a strong voice, feel safe and respected.

Achieving our mission requires raising awareness, delivering education and training, working collaboratively with like-minded organizations and assisting with service coordination and advocacy.

@EAPreventionON
#RestoringRespect

Elder Abuse Prevention Ontario | 2021

www.eapon.ca



Amber Wardell

**Communications & Resource
Coordinator**

**Ontario Association of Interval and
Transition Houses (OAITH)**



WEBINAR

**GUEST
SPEAKER**



Older Women, Gender-Based Violence and Femicide in Ontario:

Amber Wardell

Resource & Communications Coordinator,
Ontario Association of Interval & Transition Houses (OAITH)



Land Acknowledgment



Workshop Roadmap

- Presenter Overview
- Participant check-in (via chat)
- Aging Without Violence Project Summary
- Older Women & Violence- Unique Barriers
- Femicide & Older Women in Ontario
- Recognizing Warning Signs & High Risk Factors
- Responding Effectively
- Tools & Resources
- Taking Action!

Aging Without Violence (AWV) Project:

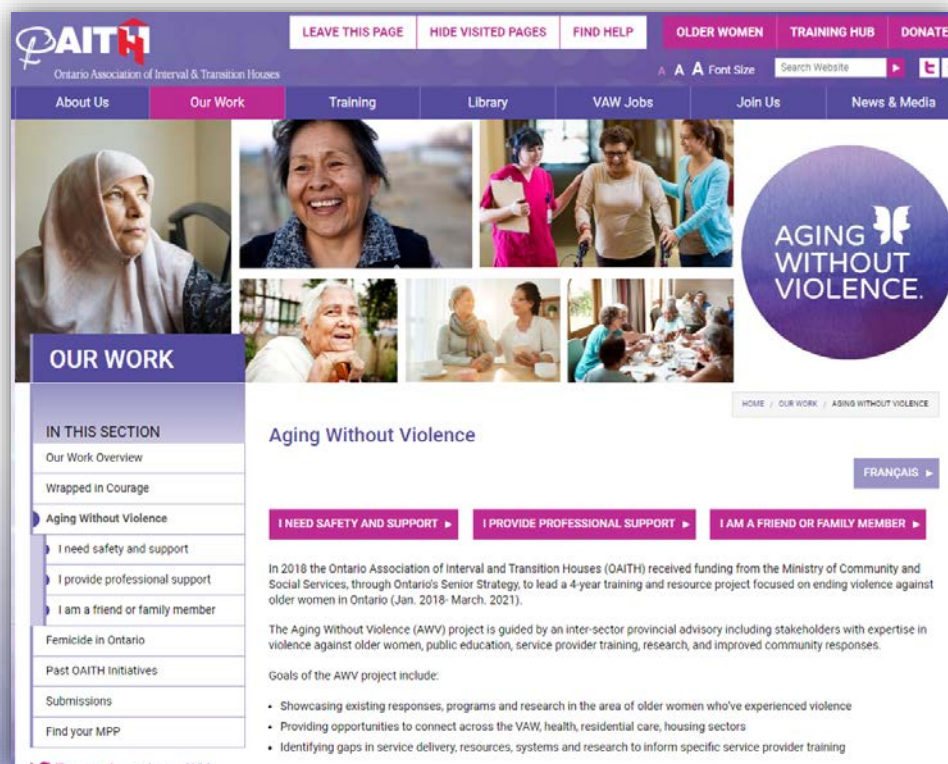
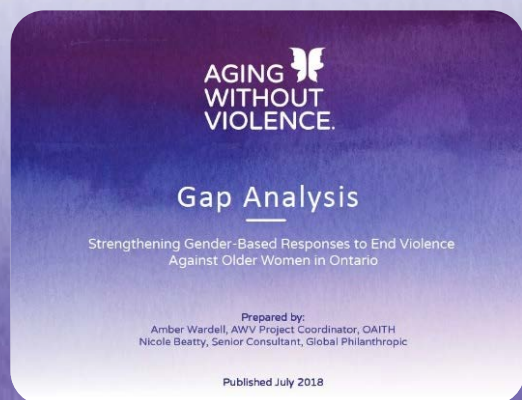
AGING
WITHOUT
VIOLENCE.



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 2020

- Funded by the MCCSS
- 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



www.oaith.ca

Language



Violence Against Women (VAW)

The United Nations defines **violence against women** as: “Any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.”

VAW sector includes emergency women’s shelters, sexual assault centres, transitional housing, and community and school based programs such as counselling. These services are available to women of all ages including trans women, and non cis- gender women.

Violence Against Older Women (VAOW)

This may include physical abuse, sexual abuse, emotional or verbal abuse, financial abuse, spiritual abuse, neglect, and includes trauma/violence/abuse experienced throughout the lifetime of the older woman.

This violence may fall under the umbrella of “family violence”, “elder abuse”, “domestic violence”, “intimate partner violence” or “intergenerational trauma” Older = aged 55 or older.

Perpetrators may include family members, care givers, spouses/partners, ex partners, neighbours, acquaintances, service providers. An older woman may experience various types of violence from multiple perpetrators at the same time.

Why focus on older women specifically?



“Freedom from abusive behaviour, including physical abuse, sexual abuse, emotional abuse, neglect or financial abuse, by family or professionals has also been identified as a significant concern. Both men and women are at risk for elder abuse and neglect. Because **older women make up a higher proportion of the frail elderly**, they are **more likely to experience certain kinds of abuse**. **Older women are also more likely to experience abuse by their spouse than are older men**. Women 65 years of age or more are **more frequently the victims of violence at the hands of family members than are men**.

Accordingly, issues regarding elder abuse are a concern for both male and female victims, although the particular vulnerability of women in the context of elder abuse must be recognised.”- OHRC

Older Women vs. Younger women

- Additional barriers to accessing services (including emergency services)
- Older women experiencing abuse/violence more likely to be financially dependent on their abuser(s) than younger women
- Marginalized older women (for example gender diverse, Indigenous, immigrant, racialized, differently abled) described as invisible and often at higher risk for violence and physical harm/lethality by their abuser(s)
- Unique impacts of complex trauma and sexual violence in later life and across the lifespan (post menopausal considerations)
- Different attitudes about abuse and relationships,
- Distrust of services



Foundational Approaches

Intersectionality

Intersectionality includes “recognizing the ways in which sexism, racism, colonialism, ageism, homophobia, transphobia, ableism and poverty intersect in our own lives and shape our own life choices and opportunities” – *OAITH’s Intermediate Foundations course*

Intersectoral Collaboration

Collaboration between sectors. The AWW Gap Analysis highlights the need to break down silos between sectors including VAW, Elder Abuse, Healthcare, Justice, and Housing in particular.



Warning signs specific to older women

- Changes in behaviour (social)
- Fearful
- Physical injuries and/or physical health problems including increased chronic pain
- Financial changes (in who has control, bills not paid)
- Lack of food in home
- Lack of access to medication and other essential resources including assistive devices
- Lack of information about property ownership and/or finances
- Caregiver stress (in combination with other warning signs)



Aging Without Violence
is sponsored by GATW
and funded by the
Government of Ontario

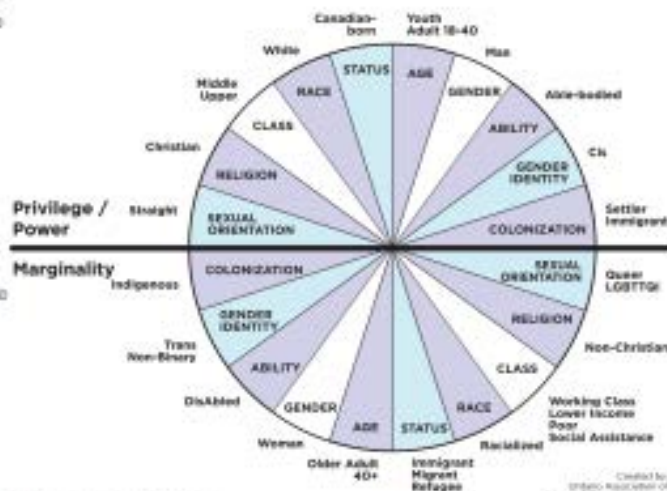


For more information, visit
www.oath.ca

Aging Without Violence research participants reported on why they believe older women experiencing violence do not access services:

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

Older women who experience violence come from a variety of communities with diverse needs, backgrounds, and experiences of systemic oppression. Below are some of the intersecting identities and the correlating positions of privilege/marginality which may impact the way an older woman experiences violence and your services. Understanding and challenging your own privilege and preconceptions and their relationship with institutional and systemic oppression is a key element of providing effective, respectful service to older women from a variety of backgrounds and experiences.²



1. *Dynamic development of total and free testosterone in men*. 2008. <http://www.hormones.org.uk/abstract.asp?abstractid=100>

© 2005 Blackwell Publishing Ltd *Journal of Internal Medicine* 258: 111–117



Unique Barriers for Older Women



- Compounded impacts of violence throughout different relationships over lifespan
- Risk from multiple perpetrators
- Physical signs attributed to age-related issues/changes
- Fear loss of autonomy (LTC, POA)
- Abuser may have POA
- Distrust of services (history of service use)
- Length of abuse/violence
- Isolation within isolation
- Limited resources
- Mobility and physical health concerns related to aging
- Conflation of perpetrator degenerative diseases with abusive behaviours
- Lack of knowledge of resources/services
- Lack of availability of resources/services with expertise in both GBV and age
- Caregiver to abuser/ Dependent on caregiving from abuser
- Blame/shame related to raising abuser
- Invisibility of VAOW outside of scope of 'elder abuse'
- Capacity re: technology-based services
- Reality of shelter spaces

What does violence against women mean to you?

- Physical abuse/assault/harm/violence/physical aggression – 59%
- Mental/emotional (inc. 5% no rights/ freedom, 2% threats) -32%
- Verbal- 21%
- Inappropriate/negative behaviour/illegal/crime/bad – 15%
- Sexual assault/abuse/harassment – 14%
- Financial abuse – 3%





Elder Abuse Network Survey

- 23 responses total – 63% response rate
- Wide range of activities
- 69% of responding EANS do discuss VAOW
- 86% rated older women's lack of knowledge of services as primary barrier, in addition to not believing what they are experiencing is violence/abuse and transportation (81%)

By acknowledging implications of gender when discussing EAN work and projects	63.16%	12
By promoting violence against women specific resources/training/information electronically (email, website, newsletter, social media)	31.58%	6
By developing resources targeted towards service providers of older women specifically	26.32%	5



What are the reasons that older women do not report abuse or violence?

- Fear (54%)
- Shame/Stigma (33%)
- Unaware of help available (18%)
- Financial fear (10%)

What are the warning signs that an older woman is experiencing or may experience violence?

- Bruises/cuts/wounds/marks/scarring/scabs/blood/other physical signs (57%)
- Isolation (34%)
- Change in behaviour (17%)
- Depressed/sad/unhappy (12%)
- Fearful/afraid (10%)
- Nervous/anxious (10%)
- Timid/shy/no self confidence/insecure (9%)



Only Half of Ontarians have knowledge of supports and services related to violence against older women

- Most recognized support – Police (44%)
- Women's shelters- (19%)
- Abuse/crisis/SA hotlines (11%)
- Elder abuse organizations/hotlines (5%)
- Health services (13%)
- Community/social/family services (11%)
- Church/clergy – (3%)



High Risk Factors

DVDRC

1. History of Domestic Violence
2. Actual or pending separation
3. Perpetrator depressed
4. Obsessive behaviour displayed by perpetrator
5. Prior threats/attempts to commit suicide
6. Victim had intuitive sense of fear
7. Perpetrator sexual jealousy
8. Prior threats to kill victim
9. Excessive alcohol/drug use
10. Perpetrator unemployed

B SAFER

- Serious physical/sexual offense
- Serious violent threats, ideations, or intent
- Escalation of physical/sexual violence or threats/ideation/intent
- Violations of civil or criminal court orders
- Negative attitudes about spousal assault
- Other Serious Criminality
- Relationship problems
- Employment and/or Financial Problems
- Substance Abuse
- Mental Disorder

DA

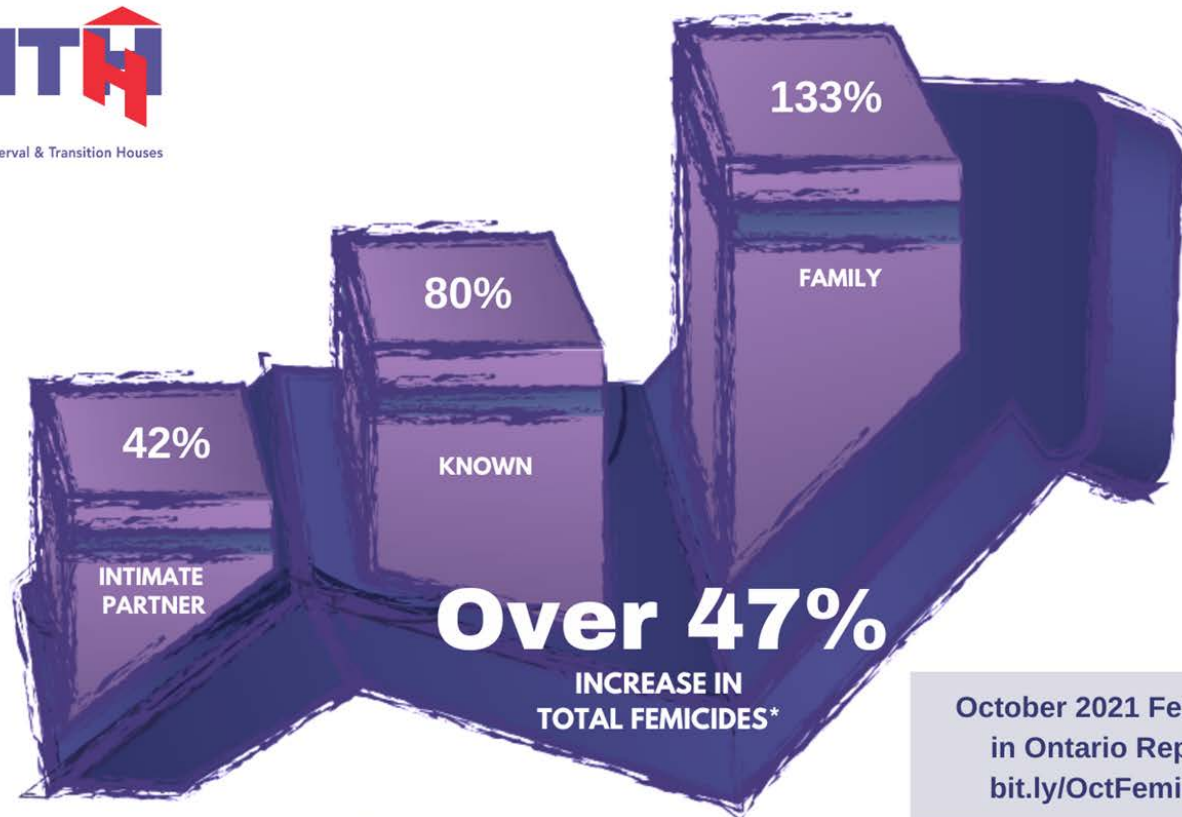
- Increase in severity or frequency over the past year
- Owns a gun
- Left after living together during past year
- Unemployed
- Threats to kill
- Avoiding arrest
- Child not his
- Forced sex
- Strangulation/choking
- Illegal drugs
- Alcoholic/problem drinker
- Controls daily activities
- Violent, constant jealousy
- Assaulted while pregnant
- Suicide attempts/threats
- Threats/harm to children
- Fear for life
- Harassment/stalking



Femicide in Ontario



- *Femicide* describes the intentional killing of women, children and gender-diverse individuals, by men.
- Since 1990, OAITH has tracked over 900 femicides across Ontario



October 2021 Femicide
in Ontario Report:
bit.ly/OctFemicide

*Comparing 2019-2020 to 2020-2021 Ontario femicide rates Dec-Oct.

Older women ages 55
and older continue
to be at the greatest
risk for femicide and
are continuing to
experience violence
from multiple
sources

OAITH's Femicide In Ontario -
September Report

bit.ly/FemicideReport

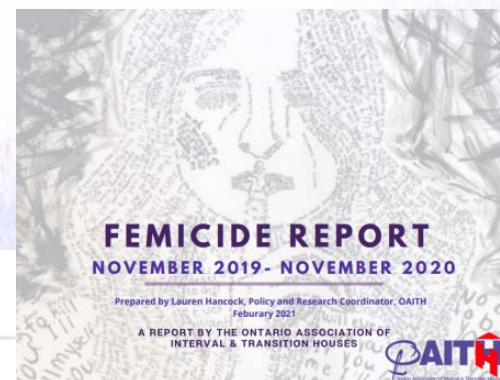
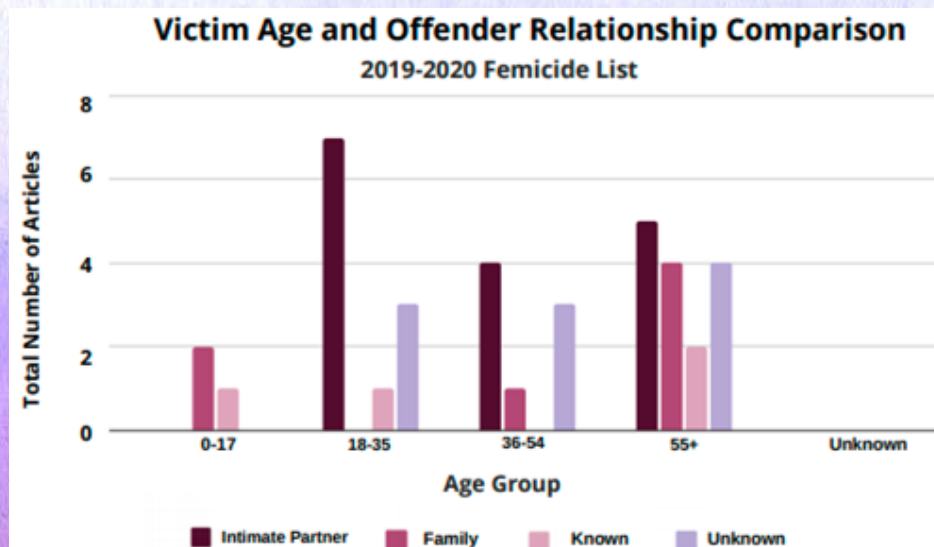


Monthly Femicide in Ontario Reports:
www.oaith.ca/oaith-work/current-initiatives.html

Femicide & Older Women



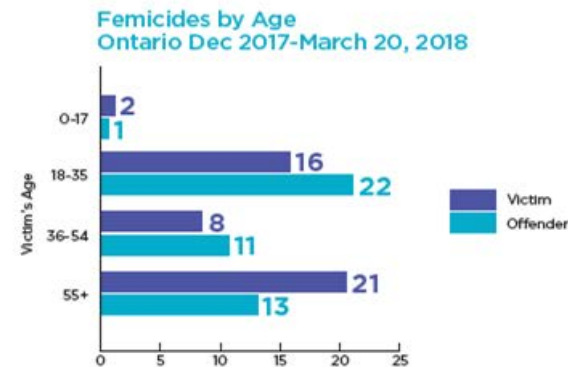
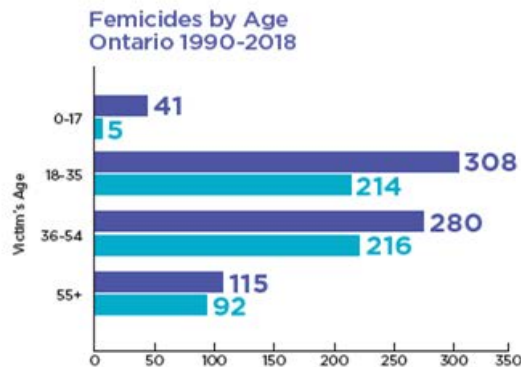
- 40.5% of the women on OAITH 2019-2020 Femicide List over 55 years old
- Women over 55 – only age group with similar risk from intimate partner, family member or someone of unknown or unspecified relationship
- Including those over 50 – Nearly half (48.6%)
- Perpetrator's age - most common 18-35 (40.5%)



Word to the Wise- Factsheet Highlight – Women over age 55 are losing their lives to gender-based violence

Are femicide rates of older women increasing?

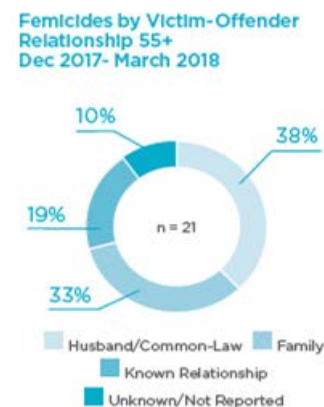
Media reports of Femicide against older women in Ontario are increasing. 45% (21/47) of femicide victims from December 2017-November 2018 have been women aged 55 or older; this rate has nearly doubled compared to femicide rates between November 2016- December 2017 (29%). (OAITH and University of Guelph Ontario Femicide Data, 2018).



Who are the perpetrators of violence against older women?

Femicide victims over 55 years old are most **likely to be killed by their partner** (including husband and boyfriend), son, ex-partner, or neighbour.

Between December 2017-November 2018, 38% of femicides of older women were committed by their partners, 33% by a family member such as a son, son-in-law or grandson, 19% by a neighbour or acquaintance, and in 10% of cases the victim-offender relationship is unknown.



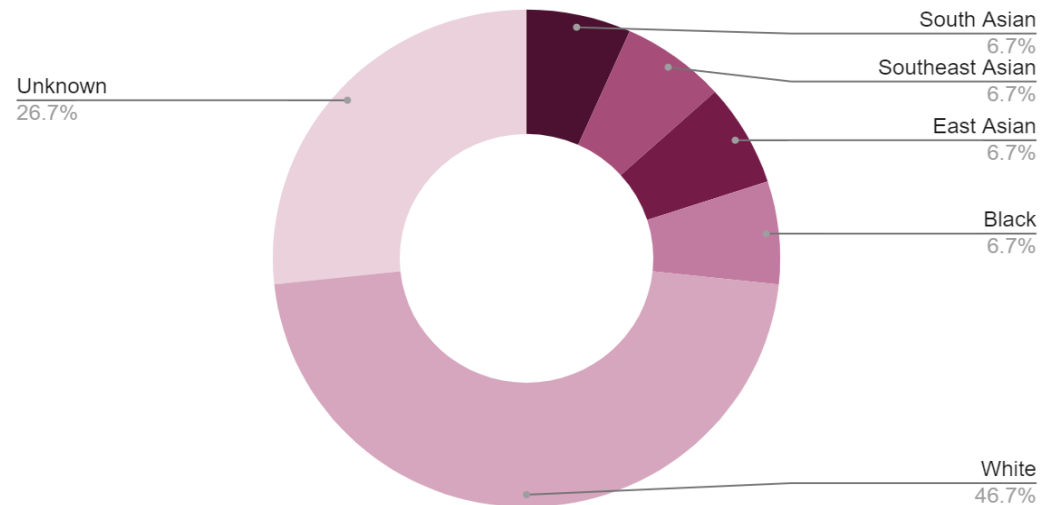
Femicide & Older Women



- 46.7% of femicide victims, ages 55 and older, from the 2019-2020 Femicide List have been identified as white
- 26.7% of femicide victims ages 55 and older were identified as being a visible minority (South Asian, Southeast Asian, East Asian and Black)
- Important to note there are limitations to this data

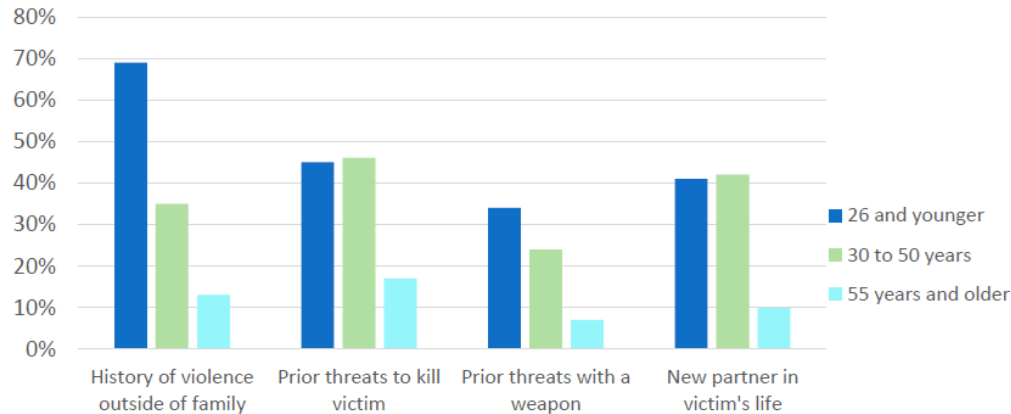
Femicide Victim Race (Victims 55 and older)

2019-2020 Annual Femicide List



View Peter Jaffe's full Presentation on Older Women & Domestic Homicide

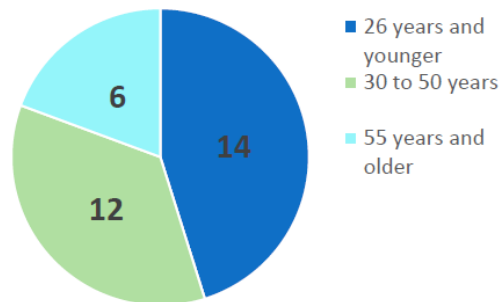
OTHER RISK FACTORS



Western
Centre for Research & Education on
Violence Against Women & Children

TOTAL RISK FACTORS

Average # of risk factors



TOTAL NUMBER OF RISK FACTORS

	26 years and younger	30 to 50 years	55 years and older
3 or less	7%	10%	43%
7 or more	86%	79%	37%



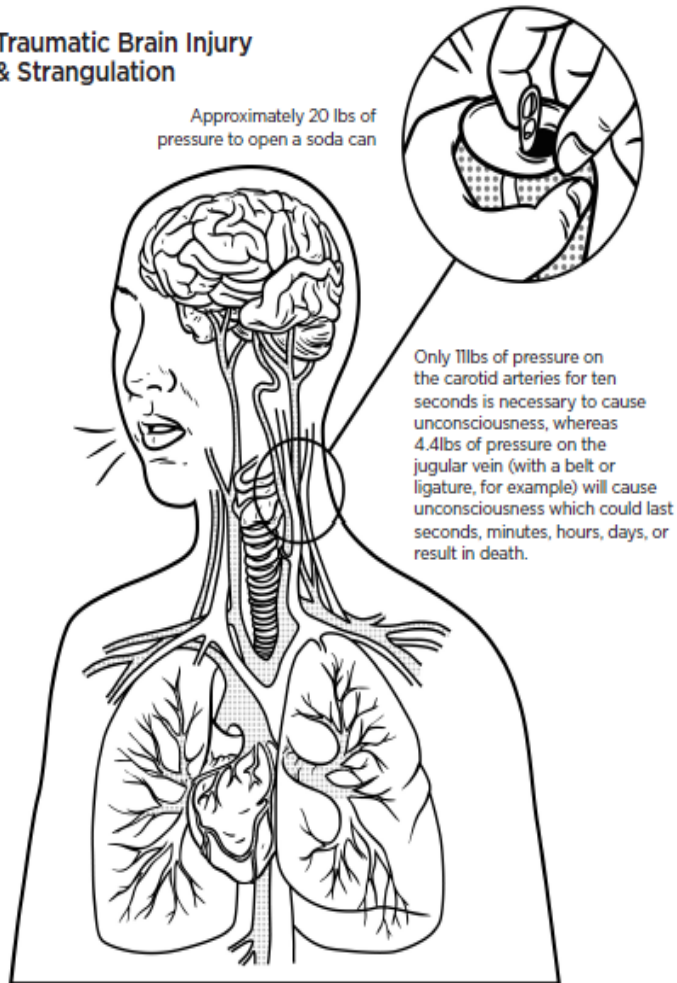
Western
Centre for Research & Education on
Violence Against Women & Children



Characteristics of Older Women Femicides/ Domestic Homicides- DVDRC

- Intact marriages (DVDRC)
- Depression within the perpetrator
- Dementia within victim
- Spouse as caregiver

Traumatic Brain Injury & Strangulation



Signs may include voice changes, difficulty/painful swallowing, hyperventilation, difficulty breathing, chin abrasions, scratches, abrasions, scrapes, redness/bruising on neck, petechiae (tiny red spots indicating ruptured capillaries), ligature marks, neck swelling, memory loss, and vomiting.

Older Women & TBI

Number of TBIs reported by women have gone up 80% in last 10 years (Sutten et al, 2018) – fastest growing incidence

Rates of IPV survivors with head injuries unknown – strangulation not always disclosed

TBI disrupts neuroendocrine system, growth hormones, estrogen

TBI risk factor for cognitive decline and accelerated aging

Little research re: relationship between TBI and menopause

Symptoms of menopause are similar to post concussion



Older Women & TBI

- Adults 55+ who have experienced a TBI have a 44% increased risk of developing Parkinson's over 5-7 years. This risk doubles following more severe or more frequent TBI, compared with mild or single TBI (mild TBI- 24%, moderate to severe TBI- 50%) (*2015 Literature review, MD edge Neurology*)
- 66% of TBIs for older adults due to falls
- MRI can not detect a concussion, post concussion, or other mild traumatic brain injuries
- Symptoms from a TBI may not show up for hours or days
- Older age negatively influences outcomes after TBI
- Current “one size fits all” approach to managing older adults with TBI neglects issues related to gender and age specifically (*Thompson et. Al, 2006*)
- Preventing head trauma can help prevent neurodegenerative diseases such as Parkinson's (*ibid.*)



What should I do if I'm worried about an older woman, but not sure if she is experiencing violence or abuse?



“Are you experiencing domestic violence?”

What questions might work better?



- Are you ever fearful of your partner/ex partner/husband/family member?
- If you had a magic wand, what would you change about the behaviour of your partner/ ex partner/husband/ family member?
- What do things look like when they are at their worst?
- Do you ever feel like you are 'walking on eggshells' around your partner/ex partner/husband/family member
- How have you been sleeping?

Effectively Responding to Concerns an Older Woman is Experiencing Abuse/Violence



- Ensure a private location where she feels comfortable/consider electronic tracking if virtually connecting
- Express your concerns clearly based on the warning signs you have noticed (SNC)
- Start from a place of safety; focus on opening the door to future conversations
- Ask questions and reflect the language being used (she may not identify as 'abuse')
- Take more time to build rapport
- Recognize taking action is a process not an event
- Acknowledge unique barriers
- Provide transportation, a phone, accompaniment to resource, not just a referral
- Avoid assumptions
- If possible, identify high risk factors and assist in safety planning

“Jean, I’m worried about you. You seem to be having a lot of physical injuries lately and I’ve also noticed you seem anxious. Can we talk more about.”

Strategies for Calming



Try- “I wonder if..”, “Let’s try”... “It seems like....”

Avoid- “It will be OK” “Calm down” “You can’t...” “why did you do that?”

- Acknowledge feelings
- Use a calm, neutral voice (not shaming tone) raised voice provokes adrenaline
- Check your posture and facial expression
- Let your regulation regulate theirs
- Full body breathing
- Offer a break (make a break plan for collaborative meetings)
- Sensory objects (stress balls, clay)
- Empathy statements
- Avoid taking aggressive responses personally
- Identify trauma response cues in immediate space
- Body awareness & self-grounding- client’s anger may be a trigger for your own

Working With Older Women



- Schedule extra time when possible
- Patience- slow down!
- Large print resources
- Linguistically and culturally appropriate resources
- Collaboration in-between EA and VAW system tables; connect with your local EAN if not already- offer a tour
- Training , curriculum, and tools specific to risk management older women.
- Cross sector collaboration essential for risk management in situations of violence against older an older woman with capacity issues or perpetrator with capacity issues
- Collection of data re: numbers of older (aged 55+) women accessing services
- Go to where the older women are- don't wait for them to come to you
- Avoid lengthy to-do lists
- Consider her mobility limitations in safety planning – extra assistive devices?
- Ask about sleep

SCENARIO

Raneeta is a 62-year-old woman who recently called for support as she is worried about her husband of 40 years. Raneeta and her husband live on a farm and do not have many friends or family, although sometimes Raneeta speaks with her sisters in India via phone. Raneeta seems anxious while you are speaking. Raneeta is worried about her husband, who has started drinking more lately. Raneeta's husband has threatened to kill her on numerous occasions and has been obsessing over her whereabouts, accusing her of adultery and following her. Raneeta's husband recently began to purchase firearms. Raneeta spoke about being shocked when her husband ridiculed her in front of neighbours last week, as he has never done this before. Raneeta's husband has never physically harmed her.

Raneeta and her husband receive social assistance. Raneeta uses a cane due to knee and hip issues and is rarely able to access a vehicle.



TREE TRACKER WORKSHEET

This worksheet uses the metaphor of a tree to help clients and service providers track the root cause and signs of impact related to the trauma (or secondary trauma) they have experienced. It also promotes exploration of nourishing supports, activities, and relationships and associated signs of wellness.

ROOTS OF TRAUMA

1

Begin with the bottom left section. Fill in examples of trauma/secondary trauma you have experienced or are experiencing. Examples for clients may include racism, trauma within a residential school, witnessing physical violence as a child, sexual violence by partner throughout marriage. Examples for service providers may include workplace violence, complex trauma cases, high trauma caseload, experiences of violence and may also include systemic oppression such as racism, ableism, sexism, and ageism.

SIGNS OF IMPACT OF TRAUMA

2

Next, move on to the section showing the leaves above the roots of trauma on the top left section of the tree and list any impacts/signs of impacts of trauma. Example may include depression, nightmares, anger, memory issues, overspending, flashbacks, joint pain and headaches.

ROOTS OF NOURISHMENT

3

Shifting to a positive focus, move on to the roots of nourishment in the bottom right section of the tree. Examples include counselling, spending time with friends, nature walks, exercise, and time spent with pets, and artwork. Examples for professionals may also include a balanced caseload, and clinical supervision.

SIGNS OF WELLNESS

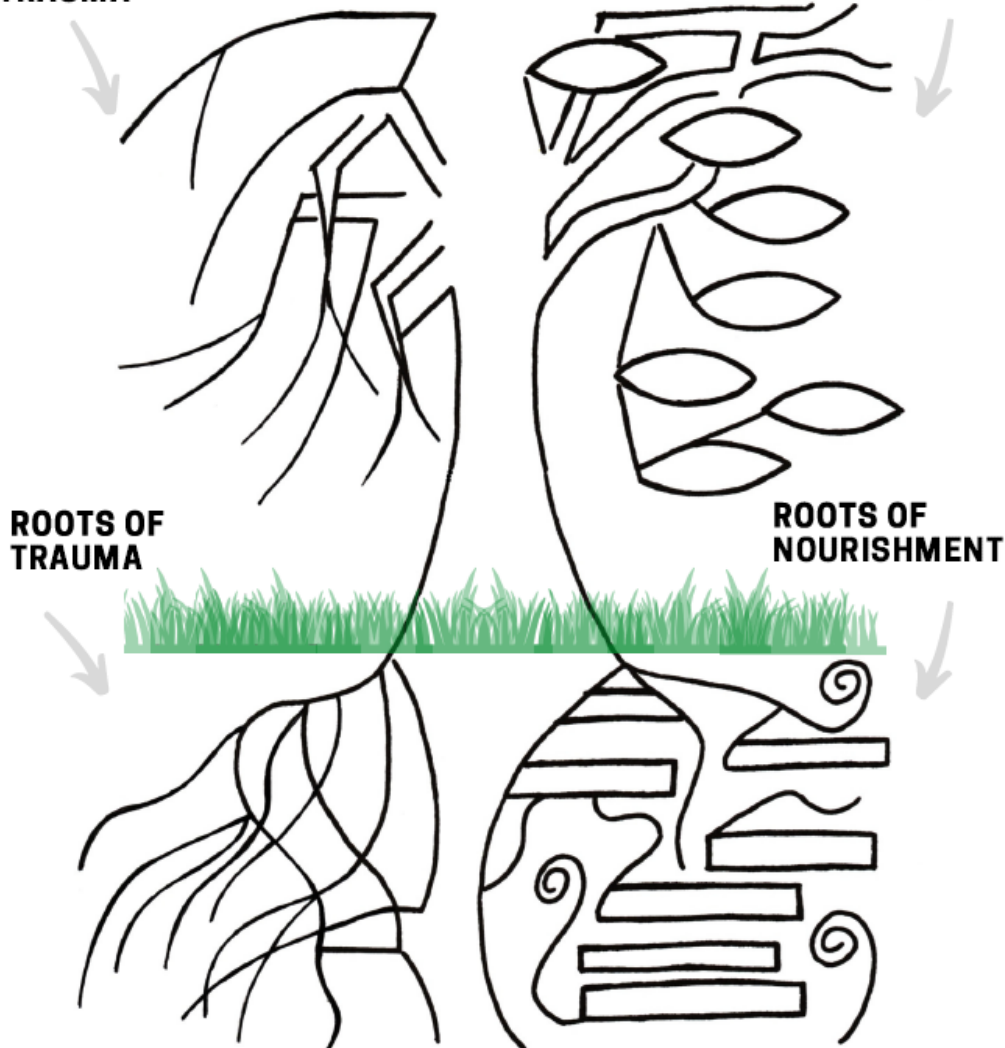
4

End the exercise with a reflection of the physical, emotional, and relational signs which show overall wellness. This may include feeling hopeful of the future, stability within relationships, feeling overall balance within your life and physical health.

TREE TRACKER WORKSHEET

SIGNS OF IMPACT OF TRAUMA

SIGNS OF WELLNESS

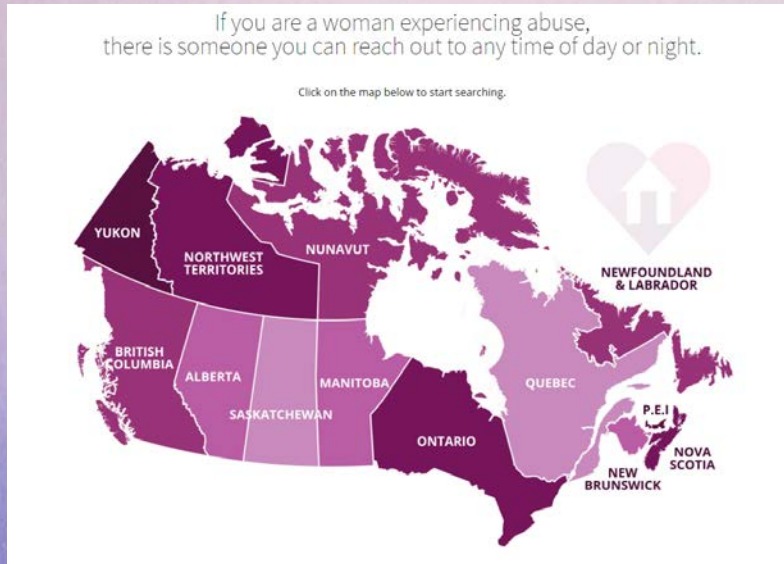


Overview of VAW Services in Ontario

www.sheltersafe.ca

www.oaith.ca

Older
Women



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 counselling 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 an 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 Women'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

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



Overview of VAW Services in Ontario- con'd



www.sexualassaultsupport.ca

www.sadvtreatmentcentres.ca



Hide your website visit

search here ... Go

[Find Support](#) [About Sexual Violence](#) [Policy & Political Action](#) [About OCRCC](#) [What's New](#)

Find Support



Sexual assault centres provide free counselling and information about sexual violence.

Click on a city or region below to get contact information for a centre near you.

[Algoma \(Sault Ste. Marie\)](#)

[Barrie](#)

[Belleville-Quinte](#)

Francophone support


For French-language sexual assault centres in Ontario, visit [Action ontarienne contre la violence faite aux femmes](#).

Ontario-wide

Assaulted Women's Helpline
1-866-863-0511

Kids Help Phone
1-800-668-6868


Talk4Healing, for Indigenous women:
1-855-554-HEAL



of Sexual Assault/
Domestic Violence
Treatment Centres

HOME ABOUT US OUR SERVICES NEWS RESOURCES RESEARCH

The Network



35 Centres Across Ontario

585 Staff

OCT.24.18
1-2:30pm EST

**Colonization,
Oppression and
Racism:
Understanding
Violence against
Indigenous
women who are
older**



Amber Skye, Researcher,
Six Nations of the Grand River

[Register Here](#)

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Tuesday Jan. 22, 2019
11:30am-1:30 pm EST

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

Presented by

**Rosalyn
Forrester,**
Community Support
& Outreach, Interim
Place
and

**Tammy
Rankin**
Senior Safety Advisor,
Regional Municipality
of Durham
Long Term Care &
Services for Seniors
Division

Word to the Wise- Monthly Factsheets

AGING WITHOUT VIOLENCE

Ontario

WORD TO THE WISE

Gender-neutral terms contribute to the invisibility of violence against older women

Learn more about this factsheet at www.oaith.ca

AGING WITHOUT VIOLENCE

Ontario

WORD TO THE WISE

Why use the term "Violence Against Older Women?" rather than "Elder Abuse" or "Family Violence?"

Learn more about this factsheet at www.oaith.ca

AGING WITHOUT VIOLENCE

Ontario

WORD TO THE WISE

At what age does a woman become "older?"

Learn more about this factsheet at www.oaith.ca

AGING WITHOUT VIOLENCE

Ontario

WORD TO THE WISE

What is "relational" anyway?

Learn more about this factsheet at www.oaith.ca

AGING WITHOUT VIOLENCE

Ontario

WORD TO THE WISE

Unique barriers exists for older women experiencing violence

Learn more about this factsheet at www.oaith.ca

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 services:

- Believed it is a personal matter (51%)
- Felt there is no purpose in getting help (49%) or abuse (33%)
- She is not aware of the available services (19%)
- She doesn't think your organization supports her age group (26%)

AGING WITHOUT VIOLENCE

Ontario

WORD TO THE WISE

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

Learn more about this factsheet at www.oaith.ca

AGING WITHOUT VIOLENCE

Ontario

WORD TO THE WISE

Strategies to increase visibility, accessibility and staff capacity

Learn more about this factsheet at www.oaith.ca

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Existing resources need to be utilized to meet the needs of older women experiencing violence

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Helpful Resources

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Capacity Concerns

Learn more about this factsheet at www.oaith.ca



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Knowledge of capacity, violence and risk is vital in supporting older women

Learn more about this factsheet at www.oaith.ca

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WORD TO THE WISE

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

Learn more about this factsheet at www.oaith.ca

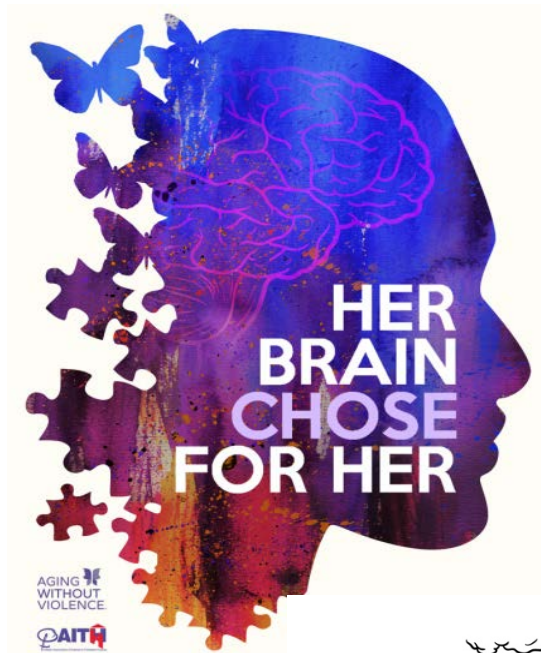
AGING WITHOUT VIOLENCE

Ontario

WORD TO THE WISE

Capacity & Intimate Relationships

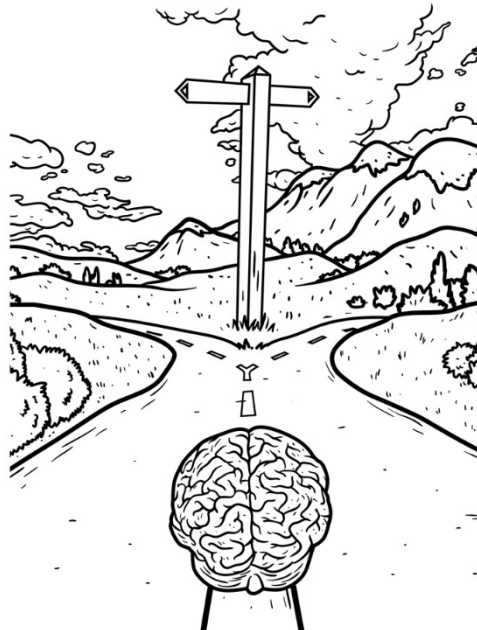
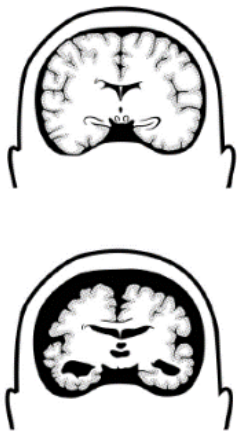
Learn more about this factsheet at www.oaith.ca



“Her Brain Chose for Her”

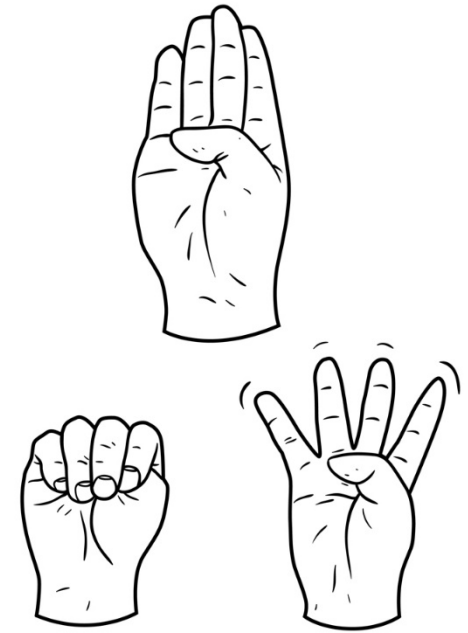
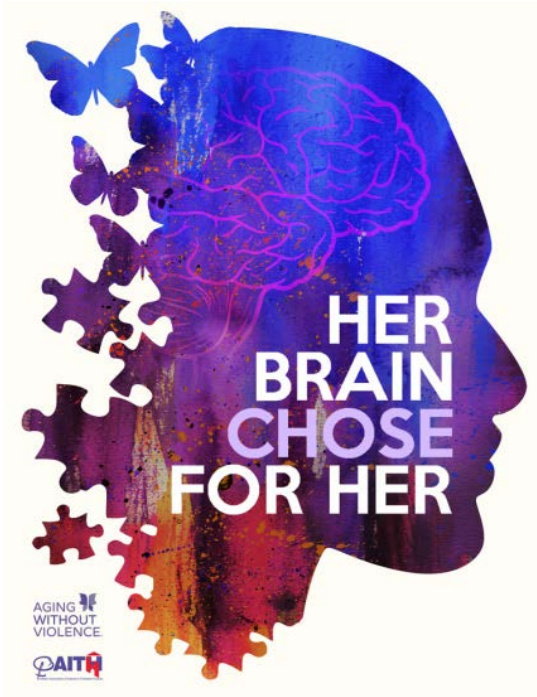
A Visual Training Tool for direct service providers to better understand the neurobiology of trauma and violence against women across the lifespan

“Often it isn’t the initiating trauma that creates seemingly insurmountable pain, but the lack of support after.”- S. Kelley Harrell



F26 - WHEN OUR BRAIN CHOOSES





F8- FLIPPING YOUR LID

“Her Brain Chose for Her” Flipping Your Lid Exercise

Invisibility posters- Service Providers



The women in
this ad **feel the
way they look.**

Older women experiencing violence often
feel invisible. Learn more about what to look
for and how to confidently provide support.

www.oaith.ca



Invisibility posters- General Public



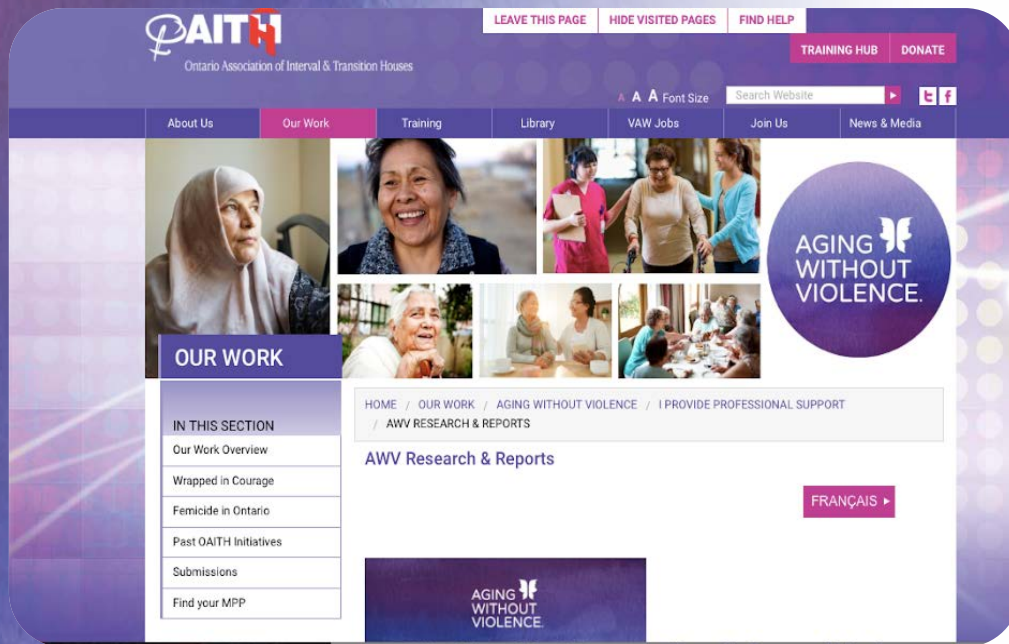
The women in
this ad **feel** the
way they look.

Older women experiencing violence often
feel invisible, but the warning signs are clear
when you know what to look for.

Senior Safety Line: 1-866-299-1011

  oaith.ca

AWV Content Now Online



- Tools and resources for service providers & community members
- Where to find help for older women experiencing violence
- Information for the personal supports of older women
- Aging Without Violence Gap Analysis, Forum Report, and environmental scan

www.oaith.ca

Word to the Wise- Factsheet Highlight – Resources related to age, capacity, and consent

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

Understanding capacity laws and utilizing capacity-related resources and supports may be useful if an older woman you are working with has capacity issues, is experiencing abuse from a caregiver or from her Power of Attorney or is caring for an abusive spouse/family member.

In Ontario, matters related to mental capacity are governed by the **Substitute Decisions Act**, the **Health Care Consent Act**, and the **Mental Health Act**.

Threats to try to have an older woman's rights taken away by means of capacity assessment or misuse of Power of Attorney may be used by an abusive partner or family member as a tactic of power and control. Providing information about her rights, offering support during appointments, and connecting her with a resource to provide more information (such as the **Seniors Safety Line** 1-866-299-1011) can help increase her safety and provide choices.

Under the Ontario Human Rights Code, "before determining that a person lacks capacity, an organization, assessment body, evaluator, etc. has the duty to explore accommodation options to the point of undue hardship."¹

Never assume capacity issues or ability limitations due to age. If you are unsure if an older woman is capable, presume capacity and work with her to get a Capacity Assessment through the **Capacity Assessment Office** (CAO): CAO@ontario.ca 1-866-521-1033

If an older woman is deemed incapable by a capacity assessor, work with the older woman and her **Power of Attorney** (POA) or substitute decision maker to access services and support.

If the POA or substitute decision maker is abusive, call the Office of the Public Guardian of Trustees (OPGT): Toll Free: 1-800-518-7901 TTY: 1-877-425-0575

If the older woman is capable of making decisions she will choose if she wants to report to police, however if she is living in long term care or a retirement home the service provider is obligated to report abuse.

If an older woman has been assessed and disagrees with the incapacity finding, a review can be requested from the **consent and capacity board**: ccb@ontario.ca Toll free: 1-866-777-7391 TTY: 1-877-301-0889

Capacity & intimate relationships

In Ontario, decisions related to marriage, separation and divorce only require a low level of capacity on the "competency hierarchy". One Ontario Court of Appeal case found a woman in the early stages of Alzheimer's disease had the capacity to decide to leave her husband, although she had been deemed as lacking the capacity to understand financial and legal issues and instruct counsel.²

Capacity & sexual consent

When a person with cognitive impairments is deemed incapable, this does not mean they are mentally incapable for all purposes at all times. The assessment of sexual consent capacity is complex, and distinct from other types of capacities due to the fluidity of intimate relationships, barriers to usage of substitute decision-makers or guardians, and lack of assessment and diagnosis strategies.^{3,4}



How can you take action to prevent femicide?

16 actions to end violence against women and prevent femicide

1. Attend a Wrapped in Courage flag raising in your community on November 25th, the International Day for Elimination of Violence Against Women: [Flag Locations](#).
2. Wear a purple scarf this November as a signal of your support of GBV survivors and the agencies that provide them with vital support.
3. Reflect on one statement within the [2021 Wrapped in Courage Proclamation](#) and learn more.
4. Use the [Wrapped in Courage social media frame](#) during Woman Abuse Prevention Month this November.
5. Post the "Wrapped in Courage" [flag graphic](#) on your social media pages with the hashtag #WrappedinCourage and a statement about your commitment to end gender-based violence.
6. Make an in-kind donation to your local VAW shelter.
7. Read ONWA's report on reconciliation with Indigenous women and explore your own roles in addressing ongoing systemic racism and colonial violence. <https://www.onwa.ca/reports>
8. Contact your local MPP by phone or email and help bring awareness to the issue of gender-based violence within your community- <https://www.ola.org/en/members/current/contact-information>.
9. Check with your local media if they are aware of and committed to implementing OAITH's Femicide Reporting Recommendations- <https://www.oaith.ca/assets/library/OAITH-Femicide-Reporting-Recommendations>.
10. Take the White Ribbon Pledge to show your commitment towards ending gender-based violence: www.whiteribbon.ca/pledge.html
11. Challenge harmful stereotypes and myths that perpetuate gender inequality and put women, girls and gender-diverse individuals at an increased risk for violence by engaging in educational discussion with family, peers and coworkers.
12. Attend your local shelter's December 6th vigil to honour the 14 women who were murdered at L'École Polytechnique in Montreal, because they were women.
13. Get involved by volunteering at your local VAW shelter- find the one closest to you via: www.sheltersafe.ca
14. Take some training to learn what to say, what not to say, and how to safely support a friend or family member who may be experiencing gender-based violence. Contacting your local gender-based violence service via sheltersafe.ca and checking out the Neighbours, Friends and Families program is a great start! <https://bit.ly/NFFtips>
15. Volunteer as a Safe Pet foster home to provide a safe home for companion animals and pets of survivors of gender-based violence to ensure the safety of their pet does not act as a barrier to escaping violence. <https://safepet.ca/>
16. Learn about consent and sexual violence rates in Ontario and get involved to support your local sexual assault centre (find your closest one via sexualassaultsupport.ca/)

wrappedincourage.ca/16actions

ARE YOU WEARING A PURPLE SCARF TODAY?



Wear a purple scarf show gender-based survivors you believe in their courage and support during [#WomanAbusePreventionMonth](#)

wrappedincourage.ca

Elder Abuse Prevention Ontario

www.eapon.ca

(416) 916-6728

Seniors Safety Line: 1-866-299-1011

Assaulted Women's Helpline

www.awhl.org

1-866-863-0511

Ontario Network of Sexual Assault/ Domestic Violence Treatment Centres

www.satcontario.com/en/home.php

(416) 323-7518



Questions?

Thank You!

Amber Wardell

Resource & Communications
Coordinator
OAITH

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Stay informed about our
future webinars and
training opportunities



QUESTIONS



Upcoming Webinars



Restorative Practices to Elder Abuse

Featuring:

**2nd Annual Volunteer Recognition
Awards for the Prevention
of Elder Abuse**



NOVEMBER 18, 2021

1:00 – 3:00 PM



Upcoming Webinars

Approaches to Elder Abuse : A Family Physician's Perspective

Nov 22, 2021 1:00 pm – 3:30 pm



**Dr. [Mark J. Yaffe](#)
BSc, MDCM, MCISc,
CCFP, FCFP (hon)**



**Dr. Bachir Tazkarji
MD, FCFP, CAC (Geriatrics)**

Webinar will speak on tools to detect suspicions of elder abuse and the roles health professionals can play in identifying and responding to the mistreatment of seniors.

Upcoming Webinars

Resilience: Small Steps for Self Care

Nov 23, 2021 1:00 pm – 3:30 pm



Maureen Pollard, MSW

This presentation will explore the definitions of compassion fatigue, vicarious trauma, burnout and moral distress and introduce strategies for self-assessment.

Participants will then learn about several factors proven to help build and recover resilience, including practical examples of small steps they can take to practice self care, even in a busy schedule.

Upcoming Webinars

Preventing Domestic Homicides with Older Couples: Lesson Learned from Tragedies

Nov 24, 2021 1:00 pm – 3:30 pm



Margaret MacPherson
Research Associate
Centre for Research and
Education on Violence Against
Women and Children



Dr. Peter Jaffe
Psychologist, Professor Emeritus
founding Director of the Centre for
Research and Education on Violence
Against Women & Children in the Faculty
of Education at Western University

This presentation outlines the often-repeated lessons learned from these tragedies that include the need for enhanced professional and public education to save lives. Future directions are discussed in terms of the need for better risk assessment, safety planning and risk management by legal and mental health professionals.

Speaker Contact

Continuing the Conversation



Amber Wardell

Resource & Communications Coordinator

Ontario Association of Interval and Transition Houses (OAITH)

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amber@oaith.ca

EVALUATION

**Please take a minute
to complete our survey!**



Connect with Us!



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