



# SENIORS SAFETY LINE

**“SENIORS SAFETY LINE: PROVIDING SUPPORT IN  
THE TIME OF COVID-19”**

**PRESENTED BY: LATOYA DWYER, SERVICE SUPPORT COORDINATOR**

**AND**

**ROCHELLA WATSON, SENIORS ASSOCIATE OF COMMUNITY ENGAGEMENT AND SENIORS INITIATIVES**

**HOSTED BY: ELDER ABUSE PREVENTION ONTARIO**

**NOVEMBER 19<sup>TH</sup>, 2020**

**ASSAULTED  
WOMEN'S  
HELPLINE**

# HOUSEKEEPING ITEMS

- Thank you, Elder Abuse Prevention Ontario, for hosting today's webinar!
- We will have a **Question and Answer** period at the end of the session.

# AGENDA



- AWHL and SSL Background
- Provincial statistics
- AWHL Call Process
- Impact of COVID 19
- Safety Planning tips and strategies
- Contact Information



## WHO WE ARE?

THE ASSAULTED WOMEN'S HELPLINE OFFERS A 24/7 TELEPHONE AND TTY CRISIS LINE TO ALL WOMEN AND OLDER ADULTS WHO HAVE EXPERIENCED ABUSE. WE PROVIDE COUNSELING, EMOTIONAL SUPPORT, SAFETY PLANNING, INFORMATION AND REFERRALS. WE RECOGNIZE ABUSE AS ONE EXAMPLE OF WOMEN AND OLDER ADULT'S SOCIAL, POLITICAL AND ECONOMIC INEQUALITY IN THE WORLD. THE HELPLINE IS DEDICATED TO WORKING TOWARDS EQUALITY FOR ALL WOMEN AND OLDER ADULTS.



## WHAT WE DO... PROGRAMS AND SERVICES

**24/7 PROVINCIAL HELPLINE AND TTY LINE AVAILABLE IN OVER 200 LANGUAGES AND ONLINE CHAT COUNSELLING**

### TRAINING TOPICS:

Elder Abuse

Intimate Partner Violence

Same Sex Partner Abuse

Criminal Harassment and Stalking Impacts of Abuse on Immigrant and Refugee Women

Legal Issues for Abused Women

Resources for Abused Women Cross-Cultural Perspectives on Violence

Against Women Working with Abused Women: Frontline and Management

Anti Violence Initiatives

Human Resources Strategies

EAP Training on Woman Abuse

Working with challenging clients Phone Crisis line counseling

### PARTNERSHIPS

# THE SENIORS SAFETY LINE

SENIORS SAFETY LINE

## THE SSL PROVIDES:



- Emotional support
- Safety planning
- Information
- Referrals



# WHO CAN CALL THE SENIORS SAFETY LINE

The helpline is open to any older adult who is being abused or is at-risk of being abused. We also provide information to relatives, friends, neighbours, caregivers and other service providers/ professionals who may have questions or concerns about an older adult.

*About us ...*

The logo for Seniors Safety Line, featuring the text "SENIORS SAFETY LINE" in a bold, sans-serif font. To the right of the text is a stylized icon of two people, one larger and one smaller, sitting together.

# WHAT WE DON'T DO

- **We do not take reports of abuse.**
- **We do not save caller information.**
- **We can not do wellness checks.**
- **We do not offer in-person support/services.**



WHAT'S  
NEW?

November  
16th

11am-8pm M-F



**The Assaulted Women's Helpline  
is pleased to introduce  
Online Counselling  
for women and seniors.**

For more information visit [www.awhl.org](http://www.awhl.org)

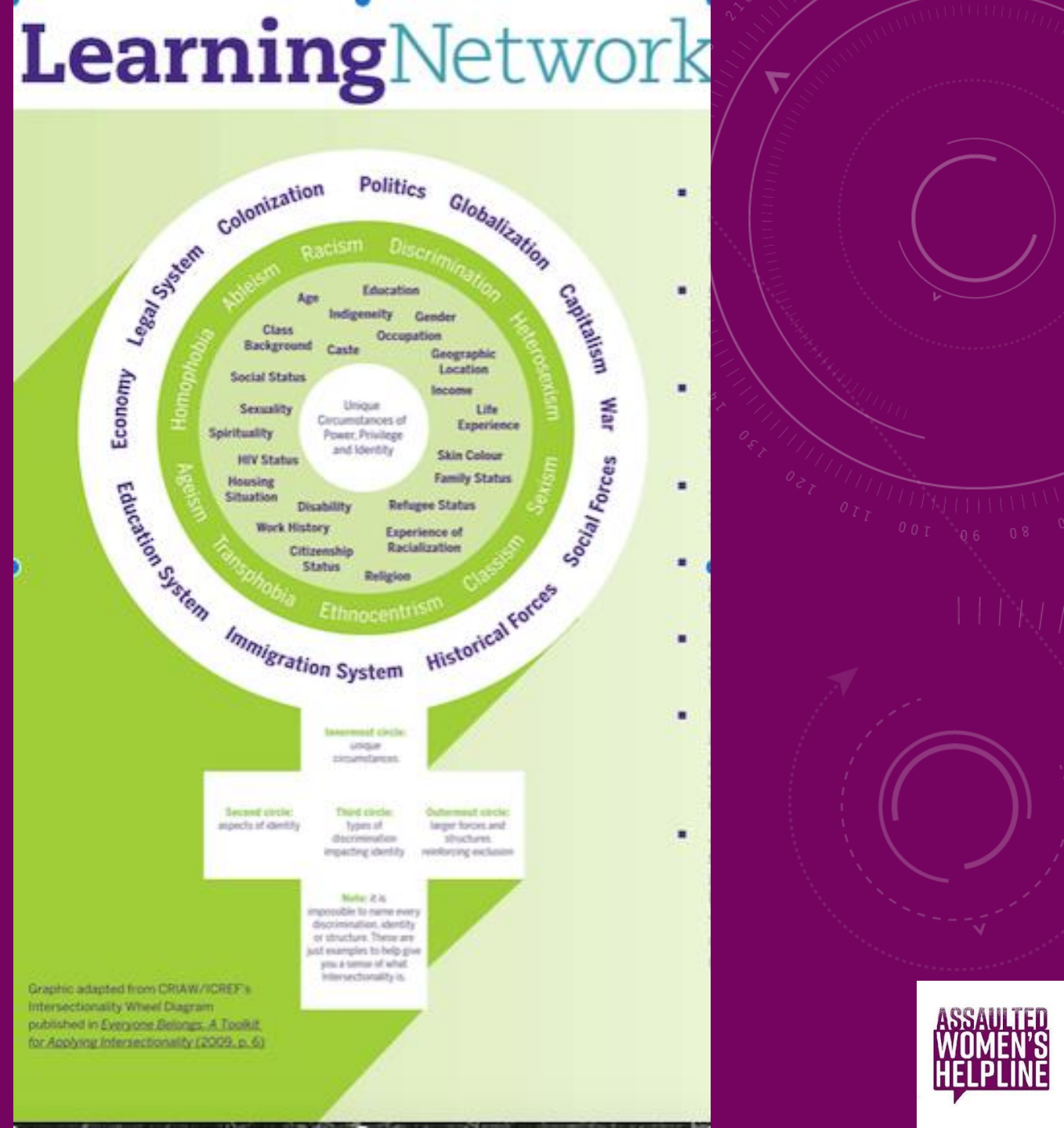


Online Counselling



# INTERSECTIONALITY

- Best practices AWHL takes an intersectional, non-judgmental, AR/AO approach to services.



# AWHL 2020 “OUT IN THE OPEN” CAMPAIGN VIDEO



# INTIMATE PARTNER VIOLENCE INTERSECTS WITH ELDER ABUSE

**STOP VIOLENCE AGAINST WOMEN**



**1 in 7 women** aged 60+ worldwide experienced some form of abuse in the past year

 World Health Organization

November is

**WOMAN ABUSE PREVENTION MONTH**

We all have a role to play in ending violence against women.

[ontario.ca/women](https://ontario.ca/women) 

# FEMICIDE

The Ontario Association of Interval and Transitional Houses compiles a Femicide report annually. Between 2018-2019 **out of the 37 femicides 11 were older women ages 65 plus.**



|                            |              |
|----------------------------|--------------|
| 416/647                    | 23,759 calls |
| 519, 905, 613,<br>807, 705 | 23,402 calls |
| 905                        | 32%          |
| 613                        | 29%          |
| 519                        | 20%          |
| 807                        | 8%           |
| Out of<br>Province         | 8%           |

SOURCE: AWHL STATS 2019 (CALLS BASED ON AREA CODE)



society community relationships individual

# RISK FACTORS

Source: World Health Organization, Ecological Model

# RISK FACTORS-INTERSECTIONAL APPROACH

- **Immigrant and Refugee Older Adults**
- **LGBTQ2S+ Older Adults**
- **Rural and Remote Older Adults**
- **Deaf/Hard of Hearing older adults**





society community relationships individual

## PROTECTIVE FACTORS

Source: World Health Organization, Ecological Model; Protective Factors: Content source: [National Center for Injury Prevention and Control, Division of Violence Prevention](#);

# PROMISING INTERVENTIONS

- **Helplines to provide information and referral.**
- Safe houses and emergency shelters.
- Caregiver support and psychological support for persons who behave abusively.
- Self Help Groups.
- Interdisciplinary Teams/Collaborations.

Source: World Health Organization, 2020

# PROMISING INTERVENTIONS

- **Technology can be used to provide social support networks and a stronger sense of belonging**
- **Increase telephone contact with close family and friends, and voluntary organizations.**
- **Education about disrespect and mistreatment.**

Source: Media Scan of Older Adults in Canada during COVID 19 Pandemic: Impacts on Abuse of Older Adults Living in the Community; Roger, K1., Cewick, M., Songose, L., Goodridge, D2., Ranville, M.3, & Walsh, C. A.4

# IMPACT OF COVID 19

- Long Term Care Homes have accounted for a large proportion of COVID-19 infections and deaths of older adults (Monpetit, 2020).
- Older adults may feel they have **less independence** with the balance between avoiding contact with others to avoid contracting COVID-19 and engaging in their normal daily activities without seeking support, as they might have pre-COVID-19.
- Due to the self-isolation requirements, and in some cases quarantine, it could be **challenging for older adults to report or talk about abuse to anyone**, especially a caregiver they are quarantined with, or due to the removal of formal supports.
- A March 2020 survey of 1,803 Canadians across the lifespan by the Mental Health Research Council found **increased rate of anxiety and depression levels** since lockdown measures came into effect (Canadian Press, 2020a).
- **Financial impacts** such as: limits on medications, growing **dispensing fees** (Benner, 2020; Lam, 2020); increasing costs for **groceries, grocery delivery and transportation**. (Canadian Press, 2020b; Connolly, 2020); as well as retirement investments experiencing hardship due to recent economic crash (Carrick, 2020).

# HAMILTON **THE** SPECTATOR

HOME LOCAL CANADA POLITICS WORLD OPINION LIFE SPORTS ENTERTAINMENT BUSINESS OBITUARIES  
Crime Council Cannabis And You Reader's Choice Marketplace

HAMILTON REGION

## Living with Dementia: the difficult decision to move a loved one to long-term care



By **Maria Iqbal** Local Journalism Initiative Reporter  
Tue., Nov. 10, 2020 | 11 min. read



Source: Maria Iqbal, The Hamilton Spectator, Nov 10 2020

# IMPACT OF COVID 19-AGEISM

- Picard, (2020) from The Globe and Mail, discussed how **ageism** is depicted in a stream of **internet memes**, illustrates that COVID-19 is a way to remove vulnerable older adults from society.
- The phrase “**Boomer Remover**”, in Aronson’s (2020) review of the COVID-19 context, suggests that the virus, merged with **embedded ageist attitudes**, serves to **characterize older adults as disposable**.

### 3 Considerations For Supporting Women Experiencing Intimate Partner Violence During the COVID-19 Pandemic

Recommended pandemic public health measures like social/physical distancing are meant to promote safety, but they may unintentionally increase the risk of Intimate Partner Violence (IPV). For some women, that could mean being confined to an unsafe space, perhaps for the first time. For other women, their isolation to one location may make it easier for their partner from whom they are separated to find them and inflict harm, even lethal harm.



Due to the changing circumstances during this time, promoting the safety of women experiencing IPV will require the use of existing strategies to prevent and respond to IPV, in addition to context-specific measures and knowledge.

Here, we share three considerations when supporting women experiencing IPV during the COVID-19 pandemic:

#### 1. Safety does not look the same for all women

When discussing and making safety plans to help increase women's safety, it is important to recognize that what may increase the safety of some women could pose risks for others. Consider that:



- While limited contact with others is encouraged to contain the spread of COVID-19, for older women, and women living with disabilities, it may be necessary for them to receive support from others in order to remain in their homes and maintain their independence.
- While hiding weapons (e.g. guns, knives) may promote safety for some women, it could escalate other forms of violence (e.g. strangulation, physical assault) and lead to increased risk for other women.
- While reducing visits to stores (e.g. grocery) increases safety against COVID-19, it may decrease safety for women experiencing IPV who could disclose abuse and seek support while out of the home.

To help women increase their safety, it is important to listen to their suggestions and explore different options or choices, while remembering that each woman's needs may be influenced by their social locations (e.g. age, race, geographical location, class, ability). For more on safety planning with different groups, read this Brief on [Creating Safety Plans with Vulnerable Populations to Reduce the Risk of Repeated Violence and Domestic Homicide](#).

#### 2. Ensuring safety during a pandemic requires additional strategies

Normal safety measures for women may be significantly disrupted by social/physical distancing and services closing or operating at a limited capacity. It is critical to publicly broadcast that women's shelters are open and continue to offer refuge and supports to women and children experiencing violence. Adaptations to existing strategies can further support the efforts of shelters to keep women and children safe. For instance:

- Since individuals are at home more, it may not be possible for women to communicate freely about what is occurring in the home. A pre-established agreement with a trusted friend, co-worker, or neighbour may be used by a woman to let others know she is in danger and needs assistance (e.g. wearing a specific piece of jewellery, asking an agreed upon question).
- Since in-person meetings are limited, communication and supports may need to be moved online. In doing so, it will be essential to recognize that using technology may require new safety measures and that individuals who inflict harm can use technology to further control and harm their partner. Learn more about online safety in these resources: [Technology, Safety & Privacy: A Toolkit for Survivors](#) and [Best Practices When Using Mobile Devices for Service Delivery](#).

• Since circumstances for individuals are changing rapidly during this time (e.g. job loss, financial insecurity, mental health challenges), some women may face increased risk of abuse and, for a smaller group of women, the potential for intimate homicide. Ongoing risk assessment and safety planning are essential.

Additional strategies continue to emerge as service providers work with women to ensure safety. Follow the work of women's shelters, anti-violence groups, and survivors to stay up-to-date on [strategies and supports](#).

#### 3. Structural barriers to safety may be amplified due to the pandemic

Barriers to accessing healthcare and support services – such as lack of accessible and gender-affirming services, discrimination and racism within the service delivery system, and fear of deportation due to precarious immigration status – will continue during this time and may even be amplified due to limitations in services. Specific to COVID-19, some communities may face increased discrimination. For instance:

- Heightened xenophobia and racism against East Asian community members. In response, view this campaign by the [Chinese Canadian National Council for Social Justice](#).
- Surveillance and criminalization to enforce social/physical distancing that may disproportionately target marginalized groups including racialized and Indigenous groups, in addition to low-income communities and individuals experiencing homelessness.
- Social stigma and shaming of individuals who have contracted COVID-19 or who work in a setting serving those who have contracted COVID-19. In response, read [this guide on addressing social stigma associated with COVID-19](#).

Compounding barriers to safety specific to the pandemic may also emerge. For instance, messages that individuals need to "sacrifice" to reduce the burden on emergency services (e.g. hospital, police) may discourage women from seeking assistance. Women's experiences of violence may also be excused as "stress"-related to the pandemic and not taken seriously.

Discrimination and exclusion result in negative short-term and long-term impacts including revictimization, health difficulties, financial problems, and traumatic stress. Efforts to support women experiencing IPV and to respond to COVID-19 need to be aware of these barriers and work with marginalized communities to address discrimination. Trauma-informed approaches are particularly well-suited to supporting women experiencing violence and oppression.



*"One-size-fits-all" approaches did not work pre-pandemic and they will not work throughout this pandemic. During this time of crisis and increased risks, we need to strengthen and build on our efforts to work together with women and communities to increase their safety.*

The Learning Network at the Centre for Research & Education on Violence Against Women & Children produced this resource in collaboration with the following organizations:



SENIORS SAFETY LINE

# THE IMPACT OF COVID 19

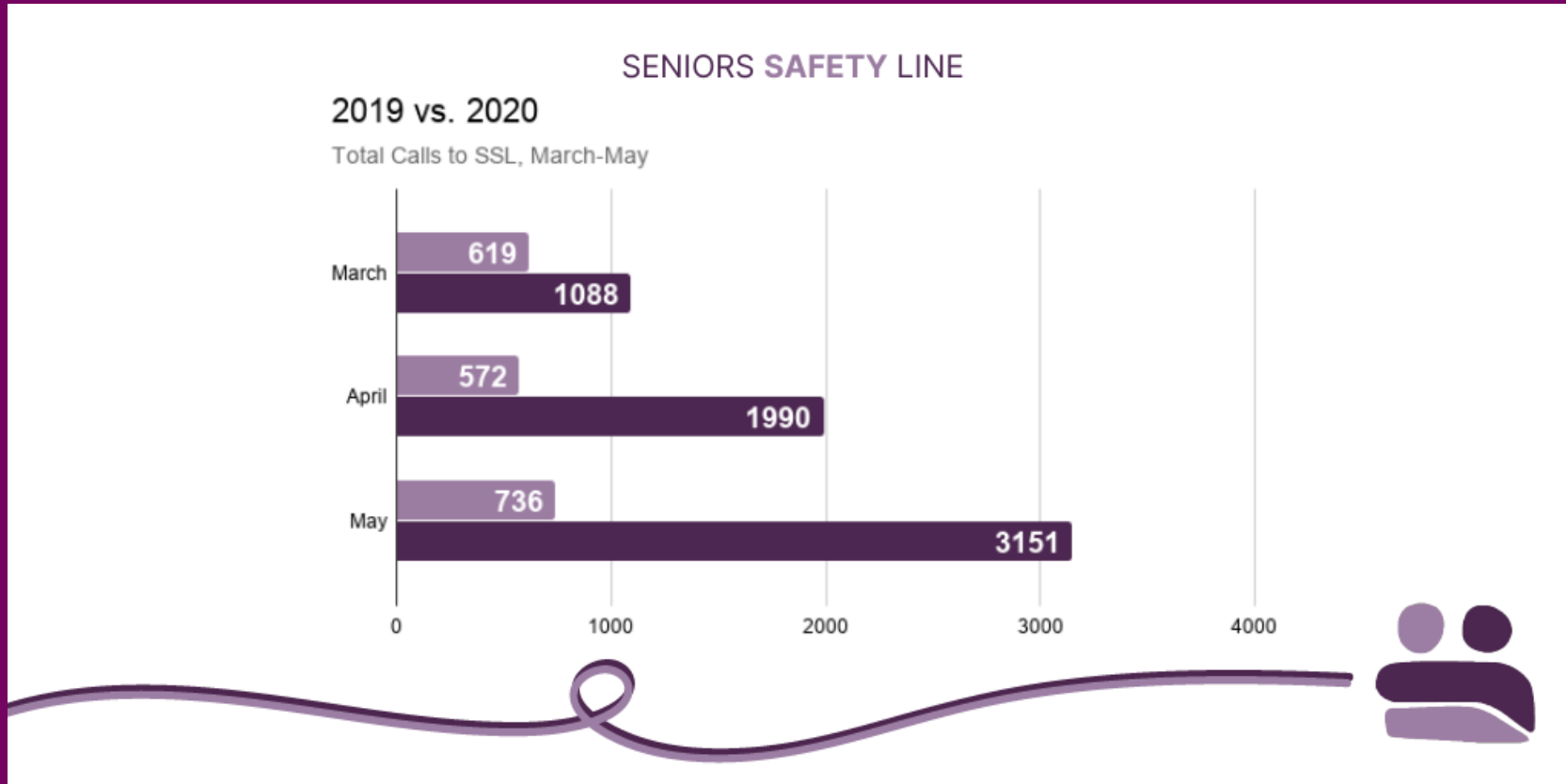
*AWHL is committed to supporting women and seniors during COVID 19.*

The publication ***"3 Considerations For Supporting Women Experiencing Intimate Partner Violence During The COVID-19 Pandemic"*** outlines three considerations when providing support.

- AWHL staff have modified safety plans with callers

ASSAULTED WOMEN'S HELPLINE

# SSL STATS: IMPACT OF COVID 19



SOURCE: AWHL STATS 2019



# INTAKE TO TRANSFER



# SAFETY PLANNING STRATEGIES AND MODIFICATIONS DURING COVID-19

## Disclaimer:

Safety Planning is not a guarantee of safety, it is a set of strategies that an older adult can take to increase their safety. As the situation evolves the safety plan will need to be modified according to the risks and resources available. The helpline staff focus on an older adult's right to self determination and respect their choices. As we are an anonymous helpline we base safety planning strategies based on the information provided by the senior at that point in time. As we do not provide case management and are providing services over the phone we cannot determine an older adult's capacity. Our goal is to promote safety, emotional support and information and referral.

# SAFETY PLANNING CONSIDERATIONS DURING COVID-19

- Abusive partners may **withhold information or share misinformation** about the pandemic to control or frighten older adults or to prevent them from seeking appropriate medical attention if they have symptoms.
- Programs for older adults may be significantly impacted – shelters may be at capacity and stretched to support new intakes. Older adults may fear entering shelters due to the risk of the spread of COVID-19 in close living arrangements with others.
- Older adults with underlying health conditions may be at even higher risk for contracting COVID-19 in settings where they would typically get support, like shelters, counseling centers, seniors centres or groups
- Abusive partners may use COVID-19 to justify and escalate their isolation tactics

# SAFETY PLANNING STRATEGIES AND MODIFICATIONS DURING COVID-19

- Call **911** if they are **in immediate danger**, despite COVID-19 Emergency services will respond even if you have symptoms or are COVID-19 positive.
- If you are unable to speak with helpline staff over the phone use our new **online counselling** service
- Contact your local shelter, or victim services (available in some areas) regarding a personal panic button or mobile tracking device that can send help if you need it.
- If using your using technology ensure you remove your browser history, most websites have a button that says escape now or remove your tracks.
- Identify a safe area(s) of the house where there is an escape route and no weapons. If arguments occur, try to move to those areas.
- If you are able, identify your partner's/abusers form of abuse, frequency and level of force so that you can assess the risk of physical danger to you.
- Let trusted friends and neighbors know of your situation and develop a plan with a visual and/or phone signal to notify them when you need help.

# SAFETY PLANNING STRATEGIES AND MODIFICATIONS DURING COVID-19

- If you have a vehicle and can drive, make a habit of backing the car into the driveway and keeping it fueled, keep a spare key. If you are unable to drive or have mobility issues have a friend or family member be ready to assist, if possible.
- When in isolation think of reasons which would be realistic for you to leave your home, such as grocery shopping, walking a dog or getting medication.
- Make Photocopies of important papers and have a hidden emergency bag ready if you need to leave quickly.
- Try and keep the following items handy: mobile, keys to your residence and vehicle (if you have one) enough medication to last you for a month, ambulatory devices or aids that assist with communication, emergency contact list, money, debit/credit cards.

# SAFETY PLANNING STRATEGIES AND MODIFICATIONS: RESEARCH DURING COVID-19

## Domestic Violence during Public Health Emergencies: STAYING SAFE WHEN STAY-AT-HOME RESTRICTIONS ARE IN PLACE



- Plan for Safety
- Increase Online Safety
- Connect with Others

Investigators: Dr. Patricia O'Campo, Principal Investigator, Dr. Nick Metheny, Dr. Alisa Velonis, Dr. Janice Du Mont (Women's College Hospital), Dr. Robin Mason (Women's College Hospital).

This study is part of the MAP/St. Michael's Hospital Foundation COVID-19 Catalyst Fund, launched to advance our most urgent priority projects.



# 1-866-299-1011



24/7, 365 days  
of the year



live counsellors,  
over 200 languages



[awhl.org/seniors](http://awhl.org/seniors)



# CONTACT US

AWHL 416-863-0511

1-866-863-0511

#SAFE (#7233)

TTY – 1-866-863-7868  
416-863-0511

Seniors Safety Line  
1866-299-1011

**Latoya Dwyer**  
Service Support Coordinator  
416-364-4144 Ext 224  
ldwyer@awhl.org

**Rochella Watson**  
Seniors Associate of Community  
Engagement and Seniors Initiatives  
416-364-4144 Ext 222  
rvassell@awhl.org





# STAY CONNECTED

Please connect with us if you have changes to services or service delivery!

Follow us!



Twitter: @SeniorsSafetyLn



Facebook: Seniors Safety Line



Instagram: @assaulted\_womens\_helpline

[www.awhl.org](http://www.awhl.org)

QUESTIONS?

THANK YOU



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