The Disappearing Age: Putting gender on the ageing agenda and uncovering and preventing violence against older women.


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Symposium Speakers:

• Jane Mears, University of Western Sydney
• Ludo McFerran, Australian Domestic and Family Violence Clearinghouse
• Matina Mottee A.M., Older Women’s Network NSW
• Dr Sonia Laverty, Older Women’s Network NSW
• Andrea Sharam, Community Housing Federation of Victoria
Aims of this Symposium

To discuss a gendered analysis of ageing in the context of abuse, family violence and homelessness.

Specifically aims to:

• Examine the range of work being done nationally to uncover the impact of violence in the home on older women
• Map responses to this abuse and violence
• Discuss strategies to reduce the abuse and its impact.
OWN NSW Committee on Prevention of Violence Against Older Women

This Committee was formed in 2007 to bring this issue to public attention and instigate government and community action and change.

Three seminars:

• 2008- NSW ‘Age Provides No Immunity’
OWN NSW Committee on Prevention of Violence Against Older Women

Three research projects:

• The Disappearing Age

• The GP Project Pathways for Referral: a pathway for increasing reporting of violence against older women by General Practitioners

• Older Women and Homelessness
Older Women Speak Up

• Spoke to approximately 270 older women, a further 100 women completed questionnaires.
• The stories the women told were drawn from across their lifespan.
• They had never been able to speak of this violence before.
• The pain and trauma they had suffered had never been dealt with.
• The results confirmed that violence in the home is a major problem for many older women.
Older Women Speak Up

They spoke of:

• the numerous creative ways they had dealt with this violence

• how empowering it was to be able to talk of these experiences in a safe and supportive environment.

• the hope that telling these stories will stop this happening to other women.
Other Australian Work: Community Based Responses

- Blue Mountains Community Legal Centre, (2005), *Home is Where the Hurt Is: a training and resource package on responding to older women experiencing family violence*, Blue Mountains Community Legal Centre, Sydney
- Caringbah Women’s Health and Information Centre (2005), *Shire Secrets: Women Over Fifty and Domestic Violence in the Sutherland Shire Project*
The Disappearing Age

A mapping exercise of knowledge of violence against older women.

The report describes and analyses our current understanding of violence against older women.

Women’s Safety, 1996. Personal Safety, 2006. The greatest increase in reporting between the two national safety surveys was by women aged 55 years and over: from 4.4% in 1996 to 10.1% in 2006.

Violence and abuse becomes more complex, insidious and debilitating problem as we age.
The Disappearing Age

Compounded by the on-going impact and effects of past abuse and trauma on mental, emotional and physical health poverty, disability, dependency.

Compounded by a culture of silence and stoicism among older women and

Exacerbated by ageism, older women being ignored and treated as invisible.
The Disappearing Age: Falling through the cracks

- Older women get ‘lost in the cracks between the domestic violence and elder abuse services system’ (Brandl and Cook-Daniels, 2002).
- Domestic violence workers have not focused on ageing.
- Aged care service providers on violence.
- Those working in the violence sector have an excellent understanding of the dynamics, effects and impact of violence,
- Those working in the ageing sector have an excellent understanding of the dynamics, effects and impact of ageing.
The logical way forward is to put the two together: share these skills- leading to integrated, community based services and support for older women experiencing violence.

- We need to shift our paradigms, to challenge the assumption that ‘family care is always best’.

- The report documents examples of good practice to prevent the violence and recommends future directions including the improvement in collaboration across aged rights and family violence sectors.
The OWN NSW Draft Strategy to Prevent Violence Against Older Women

1. Promote awareness and visibility of violence against older women
2. Create safe and supportive environments in which older women can talk about and report their experiences, support groups.
3. Improve the ability of support services to identify violence against older women
The OWN NSW Draft Strategy to Prevent Violence Against Older Women

4. Provide appropriate and proportionate levels of support and assistance to older women.

5. Ensure that all workers, those in the violence sector and those in the aged services sector, are aware and well trained and able to respond appropriately to the needs of older women, joint training.

6. Promote collaborative, integrated and community based responses across key agencies and staff supporting older women.
Other Australian Research Papers

• Bagshaw, D, Wendt, S Zannettino, L (2009) Preventing the Abuse of Older People by their Family Members, Stakeholder Paper 7 Australian Domestic and Family Violence Clearinghouse, UNSW.


• McFerran, L (2009) The Disappearing Age: a discussion paper on a strategy to address violence against older women Topic Paper 18, Australian Domestic and Family Violence Clearinghouse, UNSW.

Pathways for Referral: a pathway for increasing reporting of violence against older women by General Practitioners

• GPs represent a critical group of service providers to improve older women’s awareness and reporting of violence and abuse (OWN, 2008).

• ‘The medical profession should play a major role in recognition, assessment, and management of cases of abuse and should be part of referral and decision making processes’ (Australian Society for Geriatric Medicine, 2004)
Pathways for Referral: a pathway for increasing reporting of violence against older women by General Practitioners

However, GPs rarely ask patients if anyone is hurting them in their home. GPs have been reluctant and unsure about opening the Pandora’s box of violence and abuse in the home.

Most GPs have neither the expertise nor the capacity to meet the needs of women experiencing partner violence...A key step is an offer of referral to specialist support, such as domestic violence advocacy. (Hegarty, 2004)
Pathways for Referral: a pathway for increasing reporting of violence against older women by General Practitioners

• The aim of the Project was to provide a referral service to local GPs for women experiencing domestic violence.

• Three regions (Canterbury, Campbelltown and Nowra) targeted to increase identification of violence against older female patients and refer to a specialist domestic violence service.

• The Project formed partnerships between local Divisions of General Practice, a specialist domestic violence service able to respond appropriately to older women and the local government council aged and community development staff.
Outcomes to date

Development of resources. FAQ for GPs on the health risks of domestic violence for older women and a poster, *Is someone hurting you at home? You can talk with your doctor.*

- The materials have been endorsed by the peaks bodies General Practice NSW and the Royal Australian College of General practitioners, funded by NSW Health.
- The fifty five NSW women’s refuges have agreed to seek partnerships with local Divisions of General Practice, local government councils and aged care services to visit local surgeries and distribute the materials provided by OWN NSW.
- Surgeries will be provided with referral information to services for ongoing support for older women with safety planning, police and court processes, legal advice and alternative accommodation if needed.
Warning: Female, single and ageing? You are at risk of homelessness

*The Disappearing Age* identified the connection between living with violence and the risk of homelessness for older women.

Supported Accommodation Assistance Program (SAAP) National Data Collection reports that there has been a steady increase in the numbers of older female SAAP clients relative to older men:

- 1996-97 females, 33% of older clients
- 2007-2008 females over 50% of older clients.
OWN NSW Older Women and Homelessness

The Older Women’s Network NSW Homeless NSW, St Vincent de Paul Society, with assistance from the Australian Domestic and Family Violence Clearinghouse, formed a partnership to conduct a research project focusing on homelessness for older women.

This research aims to:

• understand the pathways to homelessness experienced by older women,
• assess the appropriateness of the current service support systems for older homeless women
• develop a data base for future advocacy and policy development grounded in research findings.
• build a strong coalition of advocates to put and keep older women on the homelessness agenda.
What do we know of the pathway to homelessness for older women?

A combination of ongoing, entrenched gendered economic disadvantage combined with divorce and separation and a lack of housing affordability.

The continued disadvantage experienced by women in the workforce is well known and includes:

- fractured work careers because of child bearing and caring
- discrimination in terms of pay equity, career opportunities
- ageism

All contribute to limited opportunities to accumulate adequate superannuation and assets.
Homelessness in context

Some evidence of the entrenched nature of gendered economic disadvantage and the consequences of being female in 2010 Australia:

• In the past 20 years the number of people living alone in their forties and fifties grew rapidly, the major reason is divorce and separation. Women are more likely to live alone than men.

• The financial circumstances of individuals aged 55-74, by marital status and gender, shows that divorced women have the lowest levels of household income, superannuation and assets compared to married people and divorced men. (Flatau et al, 2004)

• Over a third of women aged 45 and older are not married or living in a de facto relationship. That is 1,285,869 women. (ABS, 2006)

• According to the Human Rights Commission: ‘The most serious consequence of the gender gap in retirement savings is the likelihood of poverty for women in retirement’ (Somali, 2009).
Homelessness in context

‘Over the next 10 to 20 years Australia’s female population will not only be much older and also include significant populations of (older) Indigenous women and women from CALD backgrounds, as well as older women with disabilities, it will also include more women who have never married or had children, more women living in de facto relationships or remaining unpartnered for extended periods of time, more women who have had their first child in their 30s (or later still) and more women who are divorced or separated and who will not formally remarry’ (Tually et al, 2007).
The Research: Older Women and Pathways to Homelessness

Interviewed 30 older women using homeless services and drop in centres;

All the Indigenous women interviewed told stories of childhoods and adolescence which were cursed by abuse, neglect and separation.

Most of the women worked all their lives, lived independent lives and never expected to be homeless.
The Crisis

A common experience was a crisis in their fifties or sixties: either a health crisis or they were sacked from jobs, often because of their age.

‘The company I worked for… I expected to retire from there. Eleven years was a long time, I did my work well, the General Manager said ‘no one looks after my pocket like you do’ They sold the business, I was made redundant. I was devastated. I was about 45 at the time and I thought ‘Where am I going to get a job at my age?’ I found it very hard going to the interviews, there were umpteen others and they are all either younger or more experienced’
Support?

Women who had managed to keep their heads above water found themselves drowning. Their families couldn’t help because they themselves were struggling, or in some cases, didn’t want to be associated with ‘a loser’.

‘My daughter said ‘Mum, pack your bag, I’m going to take you to Housing. I’m sorry Mum you have to go’ and she dumped me at the local Housing office’.

‘It’s not happening, my brothers and sisters will come to my aid, something will happen’ But they won’t come to my aid. My family has devastated me. I always thought family are most important. I feel like a murderer. I have a family only in name. My family can’t support me, how am I supposed to expect strangers to? I would sleep on their floor. I haven’t anything to lose. I have lost my dignity.’
Causes

‘I have always been prone to depression, I knew something wasn’t right, but it could have been because of the marriage because I’m not that depressed now’.

One woman in her fifties had spent 25 years in jail. She argued that women leaving jail need to be housed straight away or they will finish up back there.

‘In the last few years I committed the crimes to go back to jail because I got a feed and had a roof over my head. I knew everybody. It was a haven. I had a little bit of dignity and respect in there. I was a hard worker, a compliant inmate.’

She said she would have avoided 10 years of jail time if she had had housing.
What they want

They were not high-need or demanding women: asked about what they wanted, they said a spare room where the grandchildren could come and stay and to have women their own age as neighbours.
Hidden Homelessness

- Homeless older women remain largely hidden because we do not look in the right places or ask the right questions.
- When we count the homeless, on census night, we go to where homeless people congregate, but most of the older women we interviewed who had slept rough, are hidden.
- They hide because of fear of being attacked and because of shame.
Historically, older women have dropped off the agenda in homeless services. Women’s refuges started with an open door policy but pressure led to prioritising younger women with children.

Older women who are accessing SAAP are being accommodated and supported across a wide range of service types: women and children’s, single women, family services, general homeless services and unfunded services.

One consequence is that a strong group of advocates for homeless older women has not developed. Older women are not the target group for any service or group of services.
Conclusion

It is alarming that in 2010 the best chance a woman has to safe, affordable and secure housing is being in a partnership.

We recommend policies and programs based on appropriate social and economic indicators and policies that recognise gender differences.

We want homelessness counts that take into account the evidence of entrenched social and economic disadvantage that are putting older women at risk of homelessness;

We don’t necessarily want more crisis services for older women. Our evidence is that older women just need a safe, affordable roof over their heads and a little support.

We need to be planning much more single person housing stock, perhaps in supportive clusters, where older women can share a yarn and a cup of tea.
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