

SILENT AND INVISIBLE:

What's Age Got To Do With It?

*A Handbook for Service Providers
on Working with Abused Older Women
in British Columbia and Yukon*

Jill Hightower and M.J. (Greta) Smith

Published by:

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INTRODUCTION

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Working with older women presents challenges to service providers in the anti-violence field.

Spousal abuse of women over fifty is often relegated by academics and administrators into the all-enveloping category of *Elder Abuse* rather than understood as being part and parcel of the whole spectrum of violence against women and their children. Some of the challenges faced by service providers are not new. They are the old challenges newly recognized by an ageing generation. Contributing to the lack of knowledge and understanding for service providers on the issue of detecting violence and abuse of older women versus elder abuse is the reluctance of women to disclose, coupled with the expectation that older people are expected to decline in their later years.

Physical injuries, anxiety, depression or sudden loss of financial resources may be dismissed by family or friends as unsurprising, with a comment like: “Well, she is getting on in years”. Indeed, the fact that many symptoms of abuse are similar to manifestations of ageing processes makes detection and identification particularly challenging at older ages.

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The material costs of some things that shelters need to serve older women well may be hard to find in shrinking budgets, for example, amenities like quiet spaces away

from young children, and requisites for mobility-impaired women.

Perhaps the most interesting challenge to service providers individually will be getting in touch with their own feelings about ageing, disabilities, and death, and the older generation. Are we ready to examine our own relationships with our mothers, aunts and grandmothers?

Service providers in the anti-violence field are well versed in the various types of violence and abuse perpetrated against women and their children. This handbook is not intended to repeat what is covered well in work others have written on the subject. We seek to help by providing additional information that pertains specifically to older women experiencing violence.

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AGEING/AGEISM

Ageing - A Normal Process

Ageing is a normal process although the prevalence of some diseases increases in older people. There are wide differences in the rate that various individuals and various physical functions show signs of ageing. Uniqueness and individuality actually increase with age due to an increase in experiences. Senility, often associated with old age, actually affects only 2-3% of people over age 60.

10 concepts on ageing to remember

Understanding all aspects of ageing enables us to better understand and provide assistance to older women victims of abuse and neglect.

- **Ageing is universal.** It is common to all human beings, female and male.
- **Ageing is normal.** ‘Growing up’ is spoken of with respect and anticipation; ‘growing old’, with fear. This fear feeds on the stereotyped picture of ageing as a loss of faculties, beauty, energy, and memory.
- **Ageing is variable.** Each individual ages in a unique way. The state of later life develops from former life patterns including socio-economic variables, and health, including exposure to violence and abuse.

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- **Ageing is variable.** Each individual ages in a unique way. The state of later life develops from former life patterns including socio-economic variables, and health, including exposure to violence and abuse.

- **Dying is normal and inevitable.** It is difficult for many to accept the idea that while a full, satisfying life is being lived, death can be anticipated as a meaningful closure of life.
- **Ageing and illness are not necessarily coincidental.** The stereotype image again lingers. As reported by one of the women participants in “Silent and Invisible”, her extreme history of abuse has brought on several health challenges; ulcers, irritable bowel-syndrome, stress, etc.
- **Older Women really represent three generations.** The group known as the “aged” covers the years 65-112, representing two, often three, generations and may include parents, grandparents and great-grandparents. No other age group includes such diversity.
- **Older Women can and do learn.** Capacity to learn new things or re-learn the old is not necessarily diminished by old age. Learning patterns may change from youth, and the speed of learning may slow, but learning ability appears to be culturally determined, not restricted by years.
- **Older Women can and do change.** As one grows older, many adjustments become necessary. Mates die, housing situations change, new activities are developed, and new friendships established.
- **Older Women want to remain self-directed.** Where dependency on others for decision making exists among older people, it has often been learned as a direct result of loss of a sense of purpose and self-respect. To prevent this loss when older adults undergo life changes, their self-direction and self-control should be maintained and supported as much as possible, even if they become dependent in some aspect of their lives.

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- **Older Women are vital human beings.** Although physical disability is often associated with mental inadequacy, it should be recognized that the need for physical help in crossing the street does not mean that the person does not know where she is going.

- **Competency** - While some women may not be competent to make their own decisions, the vast majority of abused older women are very capable. As with many abused women, symptoms of passivity, withdrawal, lack of initiative, inability to implement new information or display insight are a result of living in an abusive situation. When working with younger abused women, staff listens to their stories, believes them and offers options. The same consideration must be given to older women. (*Parts of this section are taken with adaptations from National Association of Adult Protective Services Administrators 2001*)

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Ageism - Our Misconceptions

Ageism can be defined as the prejudices and stereotypes placed on people strictly on the basis of their age. It predisposes individuals to avoid older people, perceive them unrealistically, and negate their individuality. The following example illustrates the issue.

Dear Dr. Brothers: I am a healthy, happy 78 year old, and many of my friends are also active senior citizens. What troubles me and them is that often younger people treat us as if we were mindless, helpless children. If there is someone around nearer their own age, they treat us as if we weren't in the room. This happens even if the younger person is less informed, less educated and less intelligent.

(Brothers, 1993)

Older people are often viewed as being at the end of their usefulness, productivity and a drain on services. Combined with this attitude is the portrayal by the media in which beauty, intelligence, and physical strength are the domain of the young and not possessed by older people. This depiction is particularly evident for older women in the entertainment business. Sexism contributes to ageism with the defined roles for women being childbearing, looking after family and domestic responsibilities. A woman is often viewed as obsolete after menopause and after children leave home, completely devaluing her contribution. She may in fact internalize society's attitudes and suffer a loss of self-esteem. The overall effect of ageism is the disempowerment of older people.

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There is a strong thread of ageism throughout the justice system. Police may divert the cases that come to their attention to other agencies such as Continuing Care, instead of Victim Services, simply because older people are the victims and middle aged people not much older than the officers themselves are the suspected perpetrators. Even if an officer recommends the Crown lay a charge, some Crown Prosecutors decline to pursue the case because they do not believe it has a reasonable chance of success at court, improperly stereotyping older adults as “not very reliable witnesses”. In light of lack of special training on working with older people, Crown often do not know how to elicit the best information from older witnesses and there are very few Victim Services agencies across the country who have had training on issues affecting older adults to properly support older adults through the justice process. Judges, too, can be influenced by the subtle and not so subtle forces of ageism, for example, assuming that if an older and younger person are living together, the younger person is giving the older person some form of care. (Spencer 2001, 23)

Life Experience

As reflected in our research on abuse and violence in the lives of older women, your early life experience to a large degree moulds your attitudes and perspectives toward life and influences your experience in life.

In the report *Silent and Invisible*, we document stories we heard from sixty-four women aged fifty to eighty-seven years of age. When we speak of the life experiences of these women, we are looking at most of the last century. The origins of these women were diverse, including First Nations, Canadians whose European and Asian ancestors came to Canada many generations earlier and others whose

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parents were immigrants to Canada. Women who immigrated to Canada included war brides of the 1940s, economic migrants from every continent and women escaping from wars and oppression in many parts of the world.

Regardless of their place of origin, women who are today in their sixties or older were raised in a very different social environment than we know today. Most of them had been homemakers and mothers, not employees, throughout their adult lives. When they were young there was no Medicare, religion was at the centre of community life, and most Canadians lived in rural areas or small towns. In *Treasure of Memories*, Hannah Gvorchin described her experience when growing up in East Vancouver:

“Because of the Depression there was hardly any work and no welfare unless you lived in the province for a year so we were poor and hungry.... I remember one time when out of desperation.... my father caught crabs in nets and cooked them at home. Our home smelled over a block away. He shelled the crabs, sold them and was caught and fined.” (Gvorchin, 1996)

Some women told of lifelong abuse from childhood in their family of origin. They spoke of the harsh realities of the lives of their parents, witnessing abuse of their mothers and siblings. They spoke of the importance of privacy for the family, the cardinal rule that you keep family troubles within the family, “Don’t wash your dirty linen in public”, and the notion that a man’s home is his castle. For First Nation’s women of this age, looking back on their early lives is painful as they were born at a time when their very existence, culture and heritage was being destroyed as the larger society sought to take over their land and assimilate them.

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Women in their seventies or eighties who disclose violence and abuse in their early lives will say that they really did not know of any other women who had lived in a situation of domestic violence. This was because “people just did not talk about it”. As a result they felt isolated, were extremely loyal to their families and really believed that no one would help them if they did talk about it. Like their mothers and grandmothers, they stayed in abusive relationships because they had nowhere to go and no means to support themselves and their children. Women felt there really was no escape and they had to put up with what life had given them. Their needs then are not dissimilar from their current needs.

Women in their fifties and on into their sixties related the fact that with lack of job skills it was difficult to support themselves when leaving an abusive relationship. Any sort of socially marginal status, such as age or language ability, virtually limits one’s job prospects to minimum wage, no benefits, part-time jobs, and hence, living in poverty. Older women in their fifties and sixties who have been isolated from employment by their husbands or partners face a terrible choice between two futures, abuse and economic security, or relative safety and poverty.

It is clear that there are many differences in the economic and social circumstances and attitudes of the early decades of the last century from those of the last 10 - 20 years. From the information gathered from older women, we are reminded of the reality of life in situations of domestic violence before its recognition by society, and before services and supports, including access to the criminal justice system, were available. For those women who were socialized to the views of the first half of the twentieth century, it is not easy to change attitudes.

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NAMING THE ABUSE

Definitions of Violence and Abuse in Later Life

As noted by Jacki Pritchard in her research on the needs of older women published in 2000:

“When aspects of abuse are being researched (in childhood or adulthood), a fundamental question arises: What is meant by the term abuse? Definitions are often contested.” (12)

For the purpose of violence and abuse in the lives of older women, we have chosen to use a broad definition of abuse adapted from the U.N. Declaration on the Elimination of Violence Against Women in 1993 as follows:

Any act of gender based violence or threats of such acts, coercion or arbitrary deprivation of liberty, that results in, or is likely to result in harm or suffering to older women, including physical abuse, psychological abuse, financial abuse, neglect, sexual assault, and violation of human rights.

Physical Abuse:

Infliction of physical pain, bodily harm (beating, hitting, pushing, restraining).

Physical abuse is the non-accidental use of physical force for coercion, or to inflict bodily harm. Some indicators of physical abuse or mistreatment of seniors are: unexplained

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Marie arrived at the emergency department of the General Hospital. She had a broken collar-bone and cracked rib. Hospital staff assumed she had fallen, due to disorientation, or from being unsteady on her feet. Her husband who had been abusive to her for sixty years had pushed her down the stairs and stamped on her. (This and subsequent examples in this section are from BCCEAS).

Psychological/Emotional Abuse:

Infliction of mental anguish (threatening, humiliating, intimidating, isolating).

Emotional abuse attacks an older woman's feelings of self-worth or self-esteem. Use of verbal abuse by taunts, threats, put-downs, withdrawal of love and affection, or emotional support by the abuser, over a period of time, affects how an older woman feels and is extremely harmful to her well-being.

Married for 47 years, Paul is constantly belittling his wife Anna: "You're stupid, you've never been any use to me. Serve you right if I left you. You'll never manage without me. Maybe I should look for a younger woman, or put you in a home!" Anna has become depressed, feels ugly and unwanted, has trouble eating and sleeping and sometimes has thoughts of suicide.

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Sexual Abuse:

Any form of sexual contact or exposure without consent or when the woman is unable to provide consent.

Sexual abuse is any kind of sexual interaction without an older woman's full knowledge and consent. At worst, it is assault and rape. It has been separated from physical abuse and given its own category because the possibility of sexual abuse of seniors is so rarely considered. Sexual abuse can take place with a confused senior (dementia), or confused residents in care facilities where they may be approached by other vulnerable residents, visiting spouses/partners, or occasionally, by care workers. Sexual abuse can also happen to competent older women by spouses, partners, family members, or trusted people in their lives.

Helen, a widow 64 years of age, had known Jim, 75, and his wife most of her life. Jim's wife Lil became ill with cancer and the last two years of her life were spent in and out of the hospital. Helen would visit her in the hospital and noticed that whenever the nurses mentioned Lil could go home for awhile, she would appear anxious and often cry.

Shortly after Lil died, Jim started visiting Helen daily. Six months later, he asked her to move in with him. She did and the first week they were very comfortable together. Then Jim began to be very aggressive sexually, attacking her in the middle of the night. When she complained, he said: "Lil hadn't liked it much either but kept me happy until she died."

Helen realized the horror Lil must have endured and why she had been anxious and tearful before her visits home. Helen moved out of Jim's house the next day.

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Neglect:

Refusal to provide food, shelter, clothing, assistive devices such as eyeglasses, walkers, canes. Withholding of medication or overuse of medication. Intentional withholding of basic necessities or care (active neglect), or not providing basic necessities or care because of lack of experience, information, or ability (passive neglect).

Kathryn is worried about her friend Louise who she has known for 25 years. Due to declining health, Louise moved in with her daughter and son-in-law about two years ago. Lately Louise appears to be very depressed. When Kathryn asks her “what is wrong” she replies that her daughter is often too busy to make her lunch, or take her shopping for new clothes or personal items. Quite often the daughter and son-in-law go out for dinner, not leaving Louise anything to eat.

Violation of civil/human rights:

Denial of an older person’s fundamental rights (according to legislation, the Charter of Rights and Freedoms, or the U.N. Declaration of Human Rights) e.g withholding information, denial of privacy, denial of visitors, restriction of liberty or mail censorship, or preventing her from practising her religion.

Joan lives with her son John and daughter-in-law Mary. John picks up the mail every day from the postal box on his way home from work. He goes through his mother’s mail and opens it and reads her personal letters and financial statements. Joan has stopped writing to her friends because she no longer feels free to share her feelings and problems.

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Financial Abuse:

Three components are necessary for financial abuse to happen:

- *Need or Greed - the abuser is under financial pressure*
- *Opportunity - the abuser has access to funds or property*
- *False Sense of Entitlement - "I deserve it; I am owed"*

While her mother was in the hospital, Karen removed her mother's silver tea service, some valuable books and a grand piano to her own home. When mother returned from hospital, she asked the police to assist her in recovering her stolen property. Karen stated that she had taken the goods for safe-keeping and that these items are heirlooms belonging, not just to the mother, but the entire family.

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- *Opportunity - the abuser has access to funds or property*
- *False Sense of Entitlement - "I deserve it; I am owed"*

While her mother was in the hospital, Karen removed her mother's silver tea service, some valuable books and a grand piano to her own home. When mother returned from hospital, she asked the police to assist her in recovering her stolen property. Karen stated that she had taken the goods for safe-keeping and that these items are heirlooms belonging, not just to the mother, but the entire family.

Financial Abuse and Exploitation

One area that is not as common in the lives of younger women in abusive relationships is that of financial abuse and exploitation. The following will provide service providers with some very basic understanding of some of the barriers that older women face.

Financial exploitation may involve the misuse of an older woman's money, property or other assets by a spouse, intimate partner, sibling, child or grandchild.

A person in a position of power or trust such as a professional to whom an older woman may turn to for confidential advice and/or support may also be culpable of abusing the trust of an older woman. Others may be betrayed and taken advantage of by a trusted friend, neighbour or homecare worker.

For many older women, the feelings of shame, guilt and fear parallel similar feelings that younger women experience. An additional barrier for many older women is the possibility of being rejected and isolated from members of her family and loved ones. Older abused women who are physically dependant upon the person who is abusing or exploiting them are in an untenable position – should the abuser be removed, are they then facing entering an institution? For many older women, they would rather endure the abuse than risk being sent to an institution.

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Age related mental or physical impairment presents seemingly insurmountable hurdles. Detection is often

difficult as the abuse/exploitation may be very gradual and happen over a long period of time.

When adult children or grandchildren are abusers, they are frequently dependent emotionally and/or financially upon their parent. (*Pillemer & Finkelhor 1988; Poednieks 1992*) Older women may blame themselves for poor childrearing.

Describing the Abuse

Forcing or coercing an older woman into selling her property

One woman in her seventies talked of the abuse from her daughter's boyfriend. The abuse started about eight years ago, after her husband died. Several of her daughter's boyfriends have tried to get her to sign over her property. If she did not, they threatened she would be alone and have no one. (Hightower et al. 2001, 34)

Unauthorized withdrawal of funds from back account

Illness or physical impairments place women in a position of being unable to access their bank accounts in person, resulting in sharing their P.I.N. number with others or signing cheques to enable others to withdraw cash for them.

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Stealing money or personal possessions such as jewellery or heirlooms

Adult children and/or grandchildren or caregivers may systematically over a long period of time steal items that are not visible on a daily basis and the loss is not readily apparent to the woman.

Forcing or coercing a woman to endorse her pension or benefits cheque

An adult child or grandchild still living with their (grand) mother, may not have a job or may have a substance misuse problem. Abuse, either physically or emotionally, occurs in order to get her to sign over her cheques.

Misusing Power of Attorney

Sudden or long-term illness may have prompted a woman to have Power of Attorney given to an adult child who then proceeds to carry out transactions involving her property or care and well-being without her approval.

Withholding money

When language is a barrier for immigrant and refugee women's ability to control their own finances, adult children may withhold money from mothers as a method of control and ensure she is unable to leave her home to access supportive services. Older women with low literacy levels, immigrant and refugee women, together with some First Nation's elder women frequently rely on others to

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assist with their banking, completing government forms and other financial matters and thus are at an increased risk for abuse.

Pressure to pay off debts

New partners, adult children or adult grandchildren may physically, and/or emotionally abuse her if she refuses to assume debts accumulated by them.

Detecting Financial Abuse

Without assistance from a family member or friend, it can be difficult to determine if financial abuse is currently a factor in an older woman seeking help from service providers if she has some age related dementia. The majority of older women come to the attention of anti-violence workers because of physical or sexual abuse.

The following examples will help in identifying this form of abuse:

- Sudden sale or change in title of property belonging to a woman
- Significant changes in types and amounts of withdrawals from bank
- Withdrawals from bank machine when a woman is unable to access ATM
- Standard of living not appropriate for her income
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- N.S.F. cheques when there should be adequate funds to cover

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- Unexplained transfer of funds or large withdrawals
- Sudden revision of her will, naming new beneficiary
- Granting Power of Attorney under unusual circumstances
- Disproportionately high contribution towards household expenses
- New person's name added to account unexpectedly
- Significant changes in a woman's spending habits
- Absence of needed medications or assistance appliances
- Being visited by a family member only when pension/benefits cheques arrive

Indicators

As in financial abuse, financial exploitation may also be difficult to detect without the assistance of a close friend or family member. Some activities which may indicate financial exploitation are:

- An older woman may complain that she doesn't understand why she doesn't have the same amount of money that she used to
- There may be a noticeable change in the spending habits of those who currently live with the woman or the caretaker of the woman
- Family member or spouse may refuse or be reluctant to spend money on her behalf, i.e.: personal care items, clothing or nutritious food. She may also be denied the use of television or radio

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- Failure to replace needed items such as glasses, false teeth, canes, walkers, hearing aids
- Withdrawal or threat of withdrawal of financial support or sponsorship for immigrant women

Unusual behaviour on the part of family members, friends, acquaintances or caregivers may indicate financial exploitation as follows:

- An unusual interest in the amount of money being spent on the care of the elderly person
- Expressing excessive affection for a wealthy, older person
- New acquaintances expressing gushy, undying affection
- Accompanying person is angry or hostile towards the elderly and refuses to provide necessary assistance
- Insisting on a promise of “lifelong care” in exchange for willing or deeding property/bank account to caregiver
- Family member/caregiver evasive about financial arrangement
- Hostility towards interviewers and visitors
- Absence of any visible means of support
- Focus on how much items cost; not whether the elderly person needs them
- Substance abuse; psychological problems
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Financial abuse is a criminal offence, however, adult women have the right to self-determination. In our society, older women may sometimes be perceived to have diminished competence. Their autonomy may be taken away and their confidentiality may be breached therefore, older women should be considered competent unless diagnosed otherwise by a physician. It is paramount for service providers to remember this at all times and intervention should only occur should she wish. Intervention plans must be sensitive to her needs and provide practical alternatives to enable her to make appropriate informed choices. Instructions should only be taken from the woman herself.

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Clouding The Issue - Caregiver Stress

When older women are abused by their spouse and/or adult (grand)children, this behaviour is frequently viewed as a problem manifesting from the stress of caring for someone who needs assistance with their daily care and hygiene. When support workers/service providers accept the “story” as caregiver stress when in fact this is a case of long term partner/spouse abuse or abuse by adult (grand)children, the worker may be unwittingly colluding with the abuse. This results in absolving the abuser of any responsibility, putting the woman at further risk and giving her the message that she is essentially to blame for the violence and abuse. Violence under any circumstances is unacceptable.

The following example from *Developing Services for Older Women* will point out the differences.

“To understand the differences between domestic abuse and caregiver stress, keep in mind the following definitions.

Domestic abuse is a “pattern of coercive control that one person exercises over another”. Battering is behaviour that physically harms, arouses fear and prevents the victims from doing what they wish or forces them to behave in ways they do not want. Caregiver abuse is caused by an overburdened, stressed caregiver who hurts a frail, dependent, elderly person.

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For example, a daughter may have her frail, elderly mother living with her. The daughter has a full time job and two small children to care for as well as her mother's physical and emotional needs. As a result of the stress of trying to juggle too many things, one day, the daughter snaps and hits her mother. The incident is usually an isolated event. Often the daughter is ashamed, embarrassed and extremely remorseful for her behaviour." (Schechter II, as quoted in Wisconsin Coalition Against Domestic Violence 1997)

Violence and abuse should never be confused with caregiver stress. By far the majority of caregivers at some time experience stress yet never resort to violence. Caregivers also need support and perhaps some respite from their role but violence and abuse can never be condoned. If we accept the premise that the abuse in older women's lives is the result of caregiver stress, we in fact are blaming the woman for the violence she is experiencing.

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SPECIAL ISSUES in Serving Older Women

Reaching out to older women and encouraging them to accept services presents special challenges to shelters, and anti-violence women serving agencies. What we know and have learned from older women is that it is extremely important to take time to learn and be aware of an older woman's cultural values and perspective on life. Like younger women leaving abusive relationships there have been the "good moments". In the case of a woman in her seventies or eighties who may have been abused for most of her adult life, those good moments are spread over a longer time and she will need to spend more time grieving the bad times and celebrating the good times in her life.

Older women are less likely to know about women serving agencies, or be familiar with the literature and terminology used in the sector. For many women of this generation, recognizing that they are living in an abusive relationship is a foreign concept. They may be more tolerant of abusive behaviour than younger women, particularly if this has been a pattern throughout their whole lives.

Juxtaposed to this group of older women are those who have tolerated abuse for many years but are less willing to do so as they age and the abuse increases. In some cases, children have been the reason for staying and may have acted as a buffer. When adult children leave home the abuse may intensify. It is at this point that some women

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recognize their ability to tolerate the abuse is significantly diminished and thus they make the decision to leave.

Frequently, older women may be less likely to view the criminal justice system as a viable or appropriate option for ending their abuse. All these factors are linked to the values that they grew up with including privacy, keeping things within the family and not turning to “outsiders for help”.

Older immigrant women

In addition to the barriers we face when reaching out to help older women, there are additional obstacles that older immigrant women face in ending their victimization. For all women, cultural attitudes and values define family roles, behaviors and relationships and influence whether or not a victim will seek help from outside her family. Immigration status and work history affect an older woman’s eligibility for benefits and services. If the older immigrant woman has not been in Canada for the years required to qualify for old age pension or eligibility for B.C. benefits, she may be literally penniless. Lack of financial resources usually means living with their families and being expected to provide home care duties including child care. In many situations, women have no control over basic living aspects of their lives such as when to eat or sleep. They may be reluctant to complain, resulting in loss of self-esteem over a period of time. Should she make an effort to leave, a lack of money may force her to return to her abusive situation.

Older immigrant women who are being abused have significantly increased pressures on them to remain silent. The fear of deportation is paramount in the lives of many women who have been sponsored by the person who is

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If she has not been in Canada for the required years for pension or eligibility for B.C. Benefits, she is literally penniless and at the mercy of the abuser. Shame, humiliation and isolation from family and community places additional burdens on her. Leaving this situation is seldom an option she would consider.

Some immigrant women may fear becoming involved with the justice system because of previous experiences in their country of origin where police were symbols of abuse and oppression.

Same sex partners

Most older lesbians, in order to survive under the societal norms of their younger days, were really forced to hide their identities and relationships. Most of us can remember the undercurrent of hushed rumours that would circulate in our communities around two women living together. This fact has been so overwhelming for older women that many of them still do not relate to society as lesbians but simply as two women sharing a home. The fact that domestic violence is present in some relationships was borne out by the comments of an older woman. The difficulty faced by an older woman leaving an abusive same-sex relationship is that she has none of the legal protection available to the heterosexual older women. The reality is that a woman in an abusive relationship with a controlling woman partner may lose everything she has

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Family concerns cover a broad spectrum. Fear of spending our old age alone and uncared for is a real fear for many. But that fear is further complicated for a lesbian, bisexual or transgendered person who is trapped in an abusive relationship. If the abuser is a partner, there may be no supportive family to turn to. (Allen 1997)

Women with disabilities

There are four requirements for effective victim services for women with disabilities. First, service providers need to provide adequate assessment of survivors, including questions about disability-related issues. Second, abuse service providers should be trained to recognize and effectively respond to needs related to the disability, and disability service providers should be trained in recognizing and responding to physical and sexual trauma. Third, barriers to services should be eliminated by providing barrier-free information and referral services, by ensuring physical accessibility to facilities, by providing 24-hour access to transportation, to interpreters, and to communication assistance, and by providing trained personnel to monitor risks and respond to victims receiving services through disability programs. Finally, persons with disabilities who are dependent on caregivers, either at home or in institutions, may need special legal protection against abuse. (Nosek 1998)

We are women. We are women with disabilities. We are women who are abused. We are your sisters. We are just like you. We have the same thoughts, the same feelings and the same passions as you have. Your

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First Nations

For a number of older First Nations women who are experiencing violence, living on the Reserve presents some formidable obstacles when attempting to escape. The transition house or safe home may be located on the Reserve. She therefore may not have a feeling of safety or security as the location is well known by all. The refuge may in fact be operated by a member of the abuser's family. While this in itself doesn't put her at risk, she may perceive that there might be retaliation by his family or friends should she stay at the shelter.

A lack of privacy and/or confidentiality may inhibit her desire to leave the abusive situation. Should she make a decision to leave the Reserve, she must then face the possibility of being alienated and possibly ostracized from those she holds dear, and instead face the unknown in the outside community where culturally appropriate services may not be available. Past negative responses from police and social services in the mainstream community towards First Nations women reinforces her belief that she is better off with the abuse she knows than the systemic abuse she may face outside the Reserve.

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Violence and Abuse in the Lives of Older Women

Partner violence

From the limited research that is available, we know that domestic violence in later life may be a continuation of long-term partner abuse. It may begin with retirement, the onset of a health condition or it may occur in a new intimate relationship started in later life.

The most common pattern seems to be “spouse abuse grown old”, in which the victims have been abused for most of their lives. Some women have been in such relationships for forty to fifty years or more.

“I was married 50 years until I divorced him five years ago. I had never lived alone. He was a rigid controlling man. It is good being on my own. Sometimes I feel so guilty for being so happy.” (Hightower et al. 2001, 33)

There is a very large difference in the social and cultural attitudes that have developed over the past ten years or so to those that existed during childhood and early adulthood of women over the age of 50 and prevailed in the 1940’s and 50’s. Most women in this age category have a strong ethic of privacy; “you keep one’s problems within the family”. To quote a Senior Citizen Counsellor, “if the abuse is from an older woman’s husband you will most likely find they have been married for some 40 to 50 years, and they do not want to expose their history”. In addition, these women firmly believe they are responsible for taking care of all family members. These could include older parents, if still alive, spouse, children and grandchildren.

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Putting the issue into the context of time, with lack of acknowledgement of “battering or wife abuse” by the general public and indeed the elected Members of Parliament, little or no knowledge of community support, financial resources or support from family, it is not surprising that the majority of women in this age group felt there was no place to turn and continued to remain in abusive relationships.

Coupled with the belief in responsibility for their family and their socialization of “you made your bed”, women felt there were no alternatives, resulting in their staying for years in an abusive relationship at great cost to themselves and their safety. Like many younger women in abusive relationships, older women often feel they cause the abuse by their own behaviour.

A second common pattern of abuse involves women who enter into new relationships late in life, and find that the relationship becomes quickly abusive. In many of these cases, financial abuse accompanies physical and emotional abuse.

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(Hightower et al. 2001, 33)*

New relationships often happen in later life to older women following the death of their spouse. For some women, these experiences of abuse continued from their first marriages into their new relationships. Shame and guilt at again being in an abusive relationship is an enormous barrier to seeking safety and support.

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A less common pattern of abuse is seen in “late onset” cases in which abuse begins at an older age in what had

for many years been a non-violent relationship. This type of abuse is associated with age-related conditions or stresses including retirement, dependency and changing patterns in relationships, or sexual dysfunction, and other health related issues. Retirement often increases a problem if the man has been dominant and controlling. Men who had some authority in their work, often transfer this aspect into their homes. Among things that women identified were: reorganization of kitchens, obsessive control or nit-picking over money. For some women who have health or mobility issues, spouses may become more cranky with age, resulting in abusive behaviour.

“I have a bad back, a degenerative spine disorder, and it became harder for me to get around. I needed my husband to drive me places more often. Sometimes he got cranky with me, or wouldn’t take me. Anyway it got worse, and one time, he pushed me, and I hurt my hip.” (Hightower et al. 2001, 34)

Abuse from Adult Children/ Grandchildren

Clearly there are situations where adult children may abuse older women. Often, though not always, the adult child is dependent on the victim, emotionally, financially or both. Some adult children who are abusive towards their mothers are unemployed, chemically dependent or mentally ill. In other cases, the adult child is under financial pressure, or often has a false sense of entitlement, *I deserve it; I am owed.*

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Immigrant women, in Canada as a result of sponsorship by their children, sometimes find themselves with less respect and freedom than in their country of origin. Language and lack of knowledge of resources create additional barriers to their seeking solutions.

Mrs. S immigrated to Canada, sponsored by her son. Two years have now passed and her son and daughter-in-law are complaining she is a drain on the family's resources despite her contribution of being the live-in childcare, doing all the cleaning, and cooking while her son and daughter-in-law are at work. Both son and daughter-in-law continuously shout at her and criticize the tasks she performs on a daily basis. They complain that she eats too much, talks too much and interferes with the raising of the grandchildren.

Mrs. S is very unhappy but does not want to anger her son. She feels she will have to accept her lot in life. She is very concerned about her Sponsorship.

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SUPPORT, ADVOCACY AND INDEPENDENCE

When we see an older woman who has been abused, particularly if they present as fragile and dependent, our overall tendency is to try and make things better in whatever way we can. Dignity, independence, participation, fairness and security are core principles that seniors in Canada have identified that are inter-related and promote their overall health and well-being. Dignity and independence are the two principles that stand out as critical when working with older abused women. These principles take on special significance to older adults as their overall value in society decreases with age.

Dignity means being treated with respect, regardless of the situation. It means having a sense of self-worth which comes from being accepted as one is, regardless of age, health, and social status. It also means being appreciated for one's life accomplishments, including contributions that have been made to family, friends, community and society. Simply, it is being treated as a worthy human being and a full member of society.

Independence means being in control of one's own life, continuing to have the overall freedom to make decisions on how to live one's life. Having access to a support system enables one as an older person to have freedom of choice and self-determination. (*Division of Ageing and Seniors 1998*).

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Abusers take power and control away from victims by isolating them from their friends and the community. This tactic prevents the victims from access to general and specific information and help that would assist them to take control over their lives.

It is easy for service providers, through a concern to make things better for an older client, to unintentionally control her access to information and take over her life by developing goals and expectations for her “because we know what is best for her”.

Service providers in the anti-violence field use an empowerment model of support when working with younger abused women. It is critical to continue the same approach in working with older women including:

- empathetic listening
- documenting the abuse
- providing information on abuse
- offering options and choices
- working with appropriate health and ageing services
- encouraging planning for safety and support, and other women’s services

As with younger women, a counsellor is not responsible for rescuing an older woman or fixing her situation. Keeping that principle of independence in mind, it is critical to help the woman recognize the strengths she has shown and the resources that will help her be safe, less isolated and move her to a brighter future.

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Counselling and Helping Older Women – Some Reminders

Empathetic listening with an older woman may take considerable time as she will need time to talk and grieve about her life. Compared to younger women older women have many more years to look back on. They really need to come to terms with what has happened to them through their lives, work through their feelings and to heal. This may be the first time they have shared their experience of abuse with anyone and the associated disclosures may be difficult to handle.

Some of the women who shared their stories for *Silent and Invisible* had experienced abuse from their childhood on through adult life. Skilled listening and support is needed to work on these issues and more specialized counselling may be required to work on the emotional and physical effects of long-term abuse. It may emerge that health problems resulting from previous abuse have never been treated. In these instances, the older woman might need additional health services to help her physically and emotionally.

Information sharing is very important, as an older woman may have little or no knowledge around the issues of violence and abuse. Often very isolated, older women may have no information on available community support services that can help her make decisions about the future. It is important that an older woman hears from transition house staff and other service providers that the abuse is not her fault, and if it is a new phenomena in her life, the abuse will most likely continue.

It is important to hear about the options and choices and be given the time to contemplate the choices. Frequently women in long-term abusive relationships have not been

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It is important to hear about the options and choices and be given the time to contemplate the choices. Frequently women in long-term abusive relationships have not been

afforded the opportunity to make any choices regarding major decisions in their lives. Give clear, accurate and concise information. Present options and let her decide what is best. In other words, don't step in and take on a decision-making role but give her time to determine her own path.

If the criminal justice system is involved, an older woman will need support, assistance with housing, financial resources and health services. If she is receiving assistance from home support or other ageing services, she may well need you to consult with them and advocate for her. Finally, if it is her decision to return to her home, she is going to need help in devising a safety plan.

Helping an older woman if she chooses to return to her home to determine how she can stay safe will take time and patience. All Transition Houses, Safe Homes and Second Stage Houses have safety plans that can be adapted to serve the particular situation of an older woman.

There are times when physical or mental health disabilities will interfere with the woman's ability for self-determination. These are situations which will necessitate specific interventions by mental health and continuing care professionals. In most instances, keeping the principles of dignity and independence in the forefront of one's approach to providing safety, support and empowerment to older women, it is possible to avoid the strong temptation of controlling her life in an effort to make things better. It is never too late in life to make changes.

This is an important message to share with workers in all agencies who come into contact with abused older women. Two of the women who shared their stories of abuse are over 80 years of age. Within the last five years, they have made significant changes to their lives by leaving abusive

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partners. They are safe and speak of happiness, a state they never expected to achieve.

From the research of Jacki Pritchard (2001) and our own experience, the following is a summary of what older abused women have said they need:

- advice
- to talk
- choices/options
- company
- counselling
- control over own life
- food and warmth
- health information
- housing information
- money, benefits, pensions
- physical help
- a safe place
- privacy
- to be believed
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- to feel safe at home and in the community
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Leaving/Staying - Is It Worth It?

Some older women are believed to fear that if they disclose their abuse to health care workers or social workers, they may be institutionalized. Such fears would probably keep a woman from seeking help. This is particularly relevant for older First Nations women, whose strong fear of being taken away to an institution is related to the reality of the residential school experience.

For many older women, church and/or religious practice is an integral part of their lives. Brought up to believe the precepts of her religion, she may believe it is her responsibility to stay in the marriage and it is her duty to make her spouse happy.

It is well documented that women's economic status significantly declines when leaving a relationship. For many older women living on a fixed income with their partner, she has much to lose. The impact of leaving a relationship in later life is associated with various problems and risks that are not present or are not the same for younger women. The potential losses include financial means and security, a home in which a woman may have invested a lifetime of care, and decades worth of mementoes and treasures that become increasingly precious in the later years of her life. Many older women find their pets and, in particular, a cat or dog have been the major source of support in later years.

In terms of social losses, it can mean leaving a neighbourhood and familiar services and amenities that she may have used for many years. But it seems the most overwhelming aspect of leaving that older women must cope with is accepting their losses when there doesn't seem any other option. Having tried to build a life, raise children and care for a home, and then realizing that at a time when

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you should be enjoying some sense of accomplishment you have to leave and start over again from scratch, has a profound emotional impact. However, when a woman finds herself in later life in a relationship where her physical abuse is such that she is terrified of him, her options are very poor.

Fear of institutionalization may cause women with disabilities to remain in abusive situations. Isolation and negative attitudes towards women with disabilities, together with not being believed or inability to communicate their abuse, locks them into situations from which they see no way out.

For immigrant women who have not lived in Canada for very long, the impact of leaving a long-term relationship is compounded by the fact they are still grieving for a home and country and family they left behind. They often have limited, if any English, and they suffer many aspects of systemic abuse from those individuals who are supposed to be there to assist us in times of crisis. In addition, their experience of isolation is also one of being unable to speak English. This isolation adds another layer of oppression on a woman, particularly if living in an area where others do not speak your language.

However, for some women who have left abusive situations, the relief is such that they have coped with all their losses, found living accommodation, community support and, for the first time in their lives, they are in control of their lives. Their isolation is ended.

Social isolation results from the actions of the abuser and sometimes by the woman herself as a consequence of fear, shame and loneliness resulting from her abuse. It is particularly unfortunate when a woman is socially isolated as her friends and others may turn their backs on her

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because they do not know what to do or just don't want to get involved.

Geographic isolation comes from living in a rural area at a considerable distance from any settlement. It is most often independent of social isolation, but they can occur together. Older women living in very rural situations may not have telephones in their homes. Public telephones do not exist in many areas of the province. Unable to drive, either because of having no access to vehicles, having never learned to drive or being physically unable to manage the vehicle leaves many women in very vulnerable positions. Access to support and services in their closest community may be very problematic for them, if they have been socially isolated as well. In smaller communities, response by police to a call for help can take a significant amount of time, which can increase a woman's danger and vulnerability.

For many older First Nations women, living within a very small community compounds geographic isolation. The ability to get help outside the community may be very limited, perhaps due to cultural and language issues, or lack of capacity.

The difficulties of First Nations women, including older women, is summarized by Patricia Monture-Angus as follows:

“Many aboriginal women move from the violence of our childhood's which is often an experience of the violence our mothers survived, layered over the violence we ourselves have survived - to violence relationships with men,

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BARRIERS for Older Abused Women

Even when older women victims are willing and able to seek help, they are often met by service providers and systems that are unprepared to address their special needs. Some of the barriers include the perception that elder abuse and family violence are very separate issues needing different responses. In some jurisdictions, there are separate mandatory reporting requirements for elder abuse cases. In these instances, in the case of abuse of older women, the issues of age take priority over gender.

British Columbia has no mandatory reporting requirements for elder abuse. Recourse may be through the health system, or the Ministry of Children and Family Development who are designated agencies under the Adult Guardianship Legislation.

When cases of abuse or violence involving an older woman and her husband is reported to the police, there is often some hesitancy on the part of the police to follow the Violence Against Women in Relationships policy. Similarly, in these cases, there is hesitancy on the part of some service providers in health and social services to refer these incidents to the criminal justice system. The reason for this lack of action is often due to a concern on the part of a service provider who thinks this process will impact on the victim's rights of self-determination. Care providers often assume that their clients do not want the criminal justice system to be involved. The overriding concern of a health provider may be on physical and/or

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mental impairments while forgetting the need for safety planning, counselling and support that can be provided through a consultation with a transition house.

Whether the abuse is from a partner or adult child, abuse in later life within the family setting is driven by the same forces that characterize abuse to younger women (the abusers need to exercise power and control). However, we know that older women victims tend to be even more protective of their abusers than younger women, particularly in situations in which the abuser is an offspring or disabled. In these circumstances, older women may choose to remain in their homes. If this is their choice, they will need practical assistance and information on safety and how to seek help. Consequently, all programs should reflect the needs of older women who choose to stay in their homes as well as the needs of those who choose to leave.

Partner violence to younger women is often complicated by concerns regarding her children (including child custody and visitation). In situations involving older women, concerns may revolve around her personal effects that may include lifelong treasures and the family pet. Issues of joint property and finances protecting life savings and estates is often critical.

Some of the circumstances that influence the ability of women making decisions to leave an abusive situation are:

- Emotional, physical, sexual, financial abuse, withholding or overuse of medication or mistreatment may be at the hands of a partner, caregiver, adult child or grandchild.
- Older women are less likely to report abuse, seek

mental impairments while forgetting the need for safety planning, counselling and support that can be provided through a consultation with a transition house.

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help, or use the services of transition houses or safe home networks.

- Geographic isolation and lack of transportation (public or private) make it impossible for her to escape the violence.
- Pets are extremely important to older women, often providing her with her only solace. Inability to have her pet accompany her if she leaves will prevent her from doing so.
- Older women who have little or no English face additional isolation and make it difficult to access services and seek assistance.
- Shame and humiliation in revealing a family member is abusing them may prevent her from disclosing the abuse.
- Older women with disabilities, when living in abusive situations, are at an increased risk in terms of their safety and/or isolation. Lack of accessible services, information and/or transportation put women with disabilities in untenable positions particularly if they have multiple disabilities.

Additional Challenges

There are many issues that are challenging for older women. Some additional barriers that present themselves involve family, economic and health difficulties as illustrated below:

Family

- Adult children, other family members, and friends may not support an older woman trying to leave an abusive relationship.

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- Pets are extremely important to older women, often providing her with her only solace. Inability to have her pet accompany her if she leaves will prevent her from doing so.
- Older women who have little or no English face additional isolation and make it difficult to access services and seek assistance.
- Shame and humiliation in revealing a family member is abusing them may prevent her from disclosing the abuse.
- Older women with disabilities, when living in abusive situations, are at an increased risk in terms of their safety and/or isolation. Lack of accessible services, information and/or transportation put women with disabilities in untenable positions particularly if they have multiple disabilities.

Additional Challenges

There are many issues that are challenging for older women. Some additional barriers that present themselves involve family, economic and health difficulties as illustrated below:

Family

- Adult children, other family members, and friends may not support an older woman trying to leave an abusive relationship.

- Adult children deny violence is occurring.
- Abused women may have accepted the violence for years so the family expects her to continue to live with it.
- Children abandon their mother and/or deny her access to grandchildren.
- Factors that increase a woman's risk of abuse include age, race, poverty, disability and/or location.
- Older immigrant women fear deportation when their sponsorship breaks down.

Economic

- Age reduces opportunities for employment. Many older women have not worked outside the home and lack job skills in today's market. An older woman who has not worked may be completely dependent on her husband's income, pension or other benefits. Her sole source of independent income might be her old age pension if she is 65 or older.
- Many older women who may have worked outside the home a number of years ago lack a recent employment history.
- An older woman may be unaware of the current family financial picture as her abusive partner often controls the finances leaving her totally ignorant of the current value of their assets.
- An older woman may have never handled finances, banking, pension details and might feel she has no way of looking after herself.

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- Older immigrant women often have no financial resources. If they were brought to Canada in their later years by their children, they have no access to Canada Pension.

Health

- An older women may suffer from a chronic, debilitating disease or disability and have to rely on an abusive partner for her daily care. The fact is that some older women are dependent on others, including their abusers, for assistance with daily living. This dependency can have a major impact on her decision of not only whether or not to leave but how to do this. A woman in this situation will need information, help and assurance that she will be able to access the basic supports of her daily life.
- We are learning more about the effect of long-term abuse which may result in long-term medical and psychological conditions and possibly some degree of dementia.
- Older women who need assistance in their daily care needs may fear being placed in an institution if reporting abuse.
- Shelters for abused women are often unable to accommodate women with disabilities or those needing additional daily care. If an older woman is receiving assistance from home support for bathing or assistance with her daily care, her services may well be disrupted if she leaves her home and enters a transition house.

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REFUGE, SAFETY AND SUPPORT

Making the Shelter Welcome and Accommodating

Falling Between the Cracks

“There has been considerable speculation about why older battered women fail to use services to stop their abuse. It has been suggested that older women do not seek out services because they grew up in an era when social norms discouraged them from revealing family problems to outsiders. Service providers and advocates have also assumed that older women are less likely than younger women to use services to stop abuse because they depend on their abusers for care or financial support, they fear the alternatives or the unknown, or they believe that it is too late to start new lives. It has also been suggested that they lack legal, economic, and family supports to establish alternative living arrangements. It has further been supposed that as a result of their acculturation, older women do not perceive separation or divorce as acceptable solutions to violent relationships or they may view help from outsiders as a sign of weakness or failure. Their children may discourage them from taking action because they feel protective of their fathers or they don’t want to take sides. If the children were at one time abused by their fathers, they may resent the elderly mother

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who failed to protect them. (McDowell and Raymond, 1988) In situations where women are abused by children who were themselves abused, victims may feel extreme guilt if they did not intervene on the children's behalf.” (Nerenberg 1996, 11)

Older women often fail to seek help from transition houses or safe home networks when involved in abusive relationships as they are either unaware of the service available to them or feel that it is “just” for younger women and their children. Many women have resigned themselves to “their fate”, not believing their husbands will change or there are any options available to them. Fear of being left alone or isolated from their communities should they leave their situation frequently results in these women just accepting the ongoing violence. For some women of other cultures, leaving their abusers can result in being ostracized from other members of their families, including grandchildren as well as the community itself.

Older women are less likely to report abuse, seek help or use the services of transition houses or safe home networks. While some older women may in fact use these services, statistics gathered from transition houses in 1998, and again in 2001, indicate that the number of older women accessing shelters for abused women is extremely low.

That being said, it is important to recognize that some shelters are currently unable to accommodate older women for a variety of reasons:

Structure

The physical structure may not provide a quiet space away from the general chaos that frequently is the reality of communal living in transition houses. Older women may require a much longer time to explore their options, gain

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appropriate information and quietly reflect on their situation.

Another concern is inability to access all areas of the house due to mobility, hearing or sight impairment, i.e: the washrooms may not accommodate wheelchairs or walkers, or may be on a different floor from her bedroom. As well, the kitchen and living-room areas may be inaccessible and contribute to her isolation, creating further barriers for an older woman.

Language/culture

In the case of immigrant women, shelters often are not viewed as alternatives. The lives of immigrant women are incredibly complex with cultural norms in their country of origin making the possibility of leaving an abusive relationship to live in a transition house a strange and foreign option. Shame and fear are amplified by the lack of English, creating further barriers for a significant number of women. Shelters located outside of major centers have few options to ensure that women receive appropriate translation services.

Daily living

Currently, few transition houses/safe homes can readily accommodate elderly women who have special needs as a result of age related conditions or impairments. Women requiring assistance in administration of medication, bathing, daily living tasks and possibly having some degree of dementia is generally not part of staff's training or expertise.

Additionally, front line workers who have a wealth of information and experience of working with women in abusive relationships, lack the knowledge and/or training

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of how to work with elderly women, and may be unfamiliar with the networks, services and resources available for seniors.

In making transition houses/safe home networks comfortable and welcoming for older women, it is important to recognize that, while all women face barriers when considering leaving abusive relationships, additional obstacles facing older women make the situation seem hopeless to them.

Anti-Violence Programming Issues For Older Women

Front line workers in transition houses and safe home networks, Stopping the Violence Counsellors and Victim Assistance Workers already possess the knowledge and understanding of the dynamics surrounding violence against women. However, appreciating the additional barriers facing older abused women will be necessary if we truly believe that our services are for all women and want to make them welcoming and accommodating.

An understanding of common age-related disabilities and conditions along with some sensitivity and understanding of women who have impairments will be necessary to alleviate the discomfort some older women feel when disclosing intimate details of their lives to younger women. Developing a working relationship with home care providers to assist with daily living needs, will enable shelter workers to access appropriate services when required and thus, spend their time with older women exploring options and providing her with information and /or developing safety plans.

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Issues surrounding the abuse of older women parallels those that face all women in abusive relationships. However, there may be some additional components that staff should be aware of when providing service to older women.

- Providing a quiet, confidential, safe environment, support and information, together with the protection of an older woman's dignity and right to self-determination, is paramount to providing services to her.
- Develop safety plan information that is appropriate for older women, ensuring that the print on all materials accommodates visual impairments.
- Allow extra time at counselling sessions with an older woman to allow her time to assess and consider her options.
- Ensure that the counselling setting is in a quiet space free from background noise that will enhance the ability of older women to receive clear, understandable information when they suffer from hearing impairments.
- Ensure your program is accessible for older women who have mobility difficulties and, in particular, women with multiple disabilities.
- Have options available for providing access to information for immigrant women and/or women with special needs, i.e.: interpreters, sign language.

Competency

While some women may not be competent to make their own decisions, the vast majority of abused older women are very capable. As with many abused women, symptoms of passivity, withdrawal, lack of initiative, inability to implement new information or display insight are a result of living in an abusive situation. When working with

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younger abused women, staff listens to their stories, believes them and offers them options. The same consideration must be given to older women.

Service providers should proceed on the assumption that older women are competent until proven otherwise. Older women have the resources within themselves to identify their needs and make the right choices for themselves. Instructions and/or directions should be taken only from the woman herself unless her personal physician has indicated otherwise.

A mental or physical impairment or limited impairment does not mean a woman requires all her daily living decisions made for her. She may simply need assistance in one particular area of her life. Any concerns should be referred to an older woman's physician for direction.

Reflecting the Needs of Older Women

Within the shelter, expanding the information/resources to ensure that the material reflects older as well as younger women, and displaying images of older women of all cultures throughout the shelter will promote the message that this shelter is for all women.

- Brochures and public relations material on the shelter or the issue of violence against women that is placed in the community should reflect all ages and cultures of women.
- Ensure that older women are made welcome even if they are unable to participate in the cleaning/cooking/upkeep schedule other residents participate in.
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information is appropriate and is in a larger type to accommodate visual impairment.

- Notices, clocks and calendars should be in larger print within the shelter for visually impaired women. Safety information should also be provided in Braille.
- Alarm systems should have visual as well as auditory alarms.
- Designate an accessible room for adult women only, that will provide a quiet refuge.
- Provide staff with basic information and/or training on the ageing process and issues facing older women in abusive relationships that will help to ensure the comfort level of both staff and women.
- Consider the welfare and placement of an older woman's pet, should she have one, as this is often her only solace. Without assurances of the pet's safety she will be unable to access transition house services.
- Attention to special dietary needs of elderly women should be considered.
- Consideration should be taken to ensure that older women do not get put into the "grandmother" role of taking care of other women's children.

While current budgets limit physical changes to the structure, some small changes can help make women with impairments or disabilities more comfortable, such as:

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- Grab bars near the toilet, shower/bath area
- Access to phones at appropriate levels (wheelchair accessible)
- TTY phone for hearing impaired
- 32” doorways to at least one bathroom and a flat surface at the shower entrance

Developing Safety Plans for Older Women

For the safety and well-being of older women, it is critical that service providers assist them to develop a safety plan if they choose to return to an abusive situation. When helping an older woman to develop this plan, ensure that any appropriate information is in large enough print to accommodate visual impairments.

Primary to the effectiveness of this plan is the determination of the location where a woman can seek safety if the abuse escalates into an explosion. This may be the local transition house, a trusted family member or friend but it should be a place she feels comfortable in calling upon in emergencies and is accessible. If she is using a trusted family member or friend, it is paramount that she discuss this situation with them prior to needing the shelter and safety.

Encourage women to put aside some emergency money that can be kept in a secret place or with a trusted family member or friend. Try to avoid the immediate next door neighbour.

Encourage women to develop a routine of keeping quarters for pay telephones on her person and to memorize numbers she will need in an emergency.

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Encourage her to plan ahead and store some clothing, her small personal treasures, copies of pertinent documents and photographs with a trusted friend or family member.

The care and welfare of her pet may be of prime importance to her. Planning ahead for the shelter and care of her pet will provide her with a level of comfort and help her make important decisions.

Encourage women to document the physical abuse. If medical attention is required, they will need to request that this be documented in their files.

Planning Ahead – What to take if you have time

- Identification
- Birth certificate
- Original marriage certificate and several copies
- Record of common law relationship
- Most recent income tax returns
- Money, cheque books, credit cards
- Lease, rental agreement, house deed
- Bank book, bank statement
- House keys, car keys if applicable, safety deposit keys
- Social Insurance Number
- Care card
- Medications/records
- Marriage License/Divorce papers
- Passport
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Outreach to Older Women in the Community

A very significant challenge for those working in the anti-violence field involves developing effective outreach strategies to encourage victims to come forward. While the common wisdom says that older abused women seem to respond better to personal offers of help, some transition houses in the province have had good results through advertising in the local newspapers and public announcements. In Victoria, a program for older abused women sponsored by the Victoria Women's Transition House continues to be very successful. Some of the successful groups in the United States have combined consciousness raising, problem-solving support and education. Topics that these groups often cover include the power and control wheel, myths about violence against women, and family relationships.

Support groups for older abused women can be very successful. Working to restore a sense of power, control and self-esteem can help participants overcome isolation, expand their informal support networks and break their sense of isolation. In the group, they find that they are not alone and that their life experiences are similar to others. A successful component in some shelters has been the development of peer counselling and outreach. Older women are recruited as volunteers and trained to host meetings in their homes or senior centers.

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LEGISLATION Relevant to Older Abused Women

Federal legislation

Criminal Code of Canada

While some older women may be unwilling to seek assistance from the justice system, there are actions of abuse and neglect that are crimes which are covered under sections of the criminal code.

Physical assault

- assault
- sexual assault
- forcible confinement
- murder/manslaughter
- administering a noxious substance
- counselling suicide
- robbery

Financial abuse

- theft, including theft by a person holding power of attorney
- fraud
- robbery
- forgery
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- criminal breach of trust
- conversion by trustee

Neglect

- criminal negligence causing bodily harm
- breach of duty to provide the necessities

Mental cruelty

- intimidation
- uttering threats
- harassing telephone calls

Provincial Legislation

Adult Guardianship

British Columbia has four new laws that promote every adult's right to self-determination and provide support and protection for those who are vulnerable to abuse or no longer capable of making their own decisions.

The four acts that comprise the adult guardianship legislation are:

- The Representation Agreement Act
- The Health Care (Consent) and Care Facility (Admission) Act
- The Adult Guardianship Act
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The assessment of an older adult's mental competency to manage their own affairs in British Columbia is conducted under the Mental Health Act.

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Patient Property Act

When someone is unable to manage his or her affairs, another person may apply to the courts to be appointed to look after his or her affairs. This person is called a “Private Committee”. Usually the Committee is a friend or relative. The Office of the Public Guardian and Trustee will help a committee to understand its role. The Public Guardian and Trustee monitors the actions of committees by reviewing their accounts on a regular basis.

Excerpts From Violence Against Women In Relationships Policy

The Violence Against Women in Relationships component of the policy on the Criminal Justice Response to Violence Against Women deals with a subject that poses ongoing challenges to officials in the justice system, to governments across Canada and to the general public - the abuse of women by their husbands or men with whom they have or have had relationships.

The policy directs the justice system to emphasize the criminality of violence within relationships and to take the necessary measures to ensure the protection of women and children who may be at risk.

This policy relates to the continuum of violence that occurs in relationships. It applies to a range of criminal activities from harassing telephone calls or mischief to aggravated assault.

The Ministry of Attorney General has expanded and improved upon guidelines for police, Crown counsel, corrections officials, justices of the peace and trial coordinators. The policy reinforces the Ministry of Attorney General’s commitment to a multi-agency,

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This policy relates to the continuum of violence that occurs in relationships. It applies to a range of criminal activities from harassing telephone calls or mischief to aggravated assault.

The Ministry of Attorney General has expanded and improved upon guidelines for police, Crown counsel, corrections officials, justices of the peace and trial coordinators. The policy reinforces the Ministry of Attorney General’s commitment to a multi-agency,

coordinated effort, including cooperation with community agencies, in responding to a complex problem. The approach promoted within the policy emphasizes the need for arrest and rigorous prosecution of offences of violence against women in relationships, and attempts to balance the demands of the criminal justice system with the best interests of the victim.....

...A rigorous approach to arrest, charge and prosecute, as promoted by this policy, is necessary to help eliminate violence within relationships.

Definition

For the purposes of this policy, violence against women in relationships is defined as physical or sexual assault, or the threat of physical or sexual assault of women by men with whom they have, or have had ongoing or intimate relationships, whether or not they are legally married or living together at the time of the assault or threat. Other behaviour, such as intimidation, mental or emotional abuse, sexual abuse, neglect, deprivation and financial exploitation, must be recognized as part of the continuum of violence against young and elderly women alike...

The term “violence against women in relationships” encompasses common-law and dating relationships, and has been chosen after much debate and concern expressed over the use of gender neutral terms which fail to identify that the overwhelming majority of victims of violence within relationships are female. The term “spouse assault” is used in the British Columbia Crown Counsel Policy Manual and in most police policies. It is recognized that throughout Canada various terms are used, such as woman

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abuse, wife assault, family violence, conjugal violence, domestic violence and relationship violence.

The criminal law and and criminal law policy are perceived as being applicable to all Canadians. However, in the case of older women, they seem to face many obstacles in gaining that protection if they are victims of partner violence. While police detachments in British Columbia follow a policy that states, “that, in all cases where a police officer has reasonable grounds to believe an offence has been committed, charges will be laid”, the onus for the victim to lay charges is removed. (*Ministry of Public Safety and Solicitor General 2001*) It has been the experience of some older women in the province that the police are less likely to assist in cases that involve older couples. (*Hightower et al. 2001, Stewart D. 2000*)

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I Remind Myself

That I am Lovable
That I am Valuable
That I am Special
That I Deserve nothing but the BEST
That I am Important
That I am ME!

Even though I have been Sexually abused,
Physically abused,
Emotionally, Mentally as well as Spiritually abused
That I did attend Residential School as a Child
That these are very REAL AND PAINFUL
Experiences that have happened to ME!
A very Difficult part of me that I deal with
On a daily basis.

Now as an Adult I Remind Me
That is my past
That it's still real and painful
But now as an adult I have to remember
That these are only memories
That haunt me but I don't need to live in the past
They are hurtful memories that can destroy Me
If I choose to let them.

I remind Me
This is no longer happening to Me!
It is only a memory
Now I must live for TODAY!!
I am no longer going to allow myself to be Stuck
With these painful experiences

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Now I must live for TODAY!!
I am no longer going to allow myself to be Stuck
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Now I enrich my Life
With a stronger Me
For today I live for Today
Tomorrow I will Live for Tomorrow!
Yesterday is the Past!

Written by: Rose Collins

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Silent and Invisible: What's Age Got To Do With It?
*A Handbook for Service Providers on Working
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Dedication

For our Grandmothers, Mothers, Aunts
and Sisters
in the later years of their lives who
demonstrated their resiliency
and courage to move forward with their lives
proving it's never too late to change

They are:

Beacons lighting the way for all
women to live
violence free

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Her Niece's Prayer

May I tell you a story for someone else?

The words will not be hers because she is dead. She is my aunt and it is the story of how I saw her life. It is also a credit to her life that I have chosen not to let others have power or control over me, because as a little girl and young woman I saw her cringe and become quiet when my uncle would yell or even when he was due to come home. She and my uncle lived close by my home, in a rural farming and logging community in central BC. My aunt was always warm and caring when my uncle was not present. We noticed early the change in all of us when he arrived, especially if he had been drinking. Anyway, no one spoke of this but we all must have noticed. I grew up and moved away.

Then I returned in 1983. My aunt had been ill, she had a heart attack and was hospitalized. Over the next few years I was saddened by her sadness and helplessness. She left him three times because of abuse, staying with family for short periods of time, but returning to her home and my uncle each time. I begged her to stay with me, and she did for a short time. But she loved her home. We only talked about this a few times, and she said that she didn't like being with others, and that she couldn't work and her husband would never let her go, and, that she loved her home.

My aunt died at home a few months ago. She was 65. The cause of death was said to be a heart attack or heart failure, and I believe that. But I also believe her life was shortened because of no hope.

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...Her Niece's Prayer continued

So please keep talking to people about this issue and please be available to older women. Talk to the doctors, RCMP, schools, and tell them that abuse and control by one person over another is not right. Help the courts know that homes need to be our safe place and that it isn't always women who need to leave. Take away the abuser, or at least let women know that this can happen.

My aunt's home was the one concrete thing that gave her life comfort and meaning. So on behalf of my aunt I say: "Do not forget older women. Their lives are worth saving and their wisdom worth hearing".

Thank you.

...Her Niece's Prayer continued

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Foreword

May 12, 2002 will mark the 20th anniversary of the tabling of the “*Report on Violence in the Family: Wife Battering*” in the Canadian House of Commons. When this was tabled, women who are now in their sixties, seventies and eighties were then middle-aged. Much of the progress that we have made in addressing this violence may have had little or no impact on the realities of their lives as they have moved into their later years. The Prevention of Violence Against Women Week, April 22-28, 2002, marks the release of this handbook that specifically addresses the needs and supports for older women who experience violence and abuse within their families.

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Preface

The BC/Yukon Society of Transition Houses is a provincial association representing shelters for abused women and their children (transition houses, second stage houses and safe home programs) as well as coordinating Children Who Witness Abuse Counselling Programs throughout the province. It is through the membership of the provincial organization that recognition was given to the fact that an increasing number of older women were seeking access to transition house services. As shelters began to look at providing appropriate support services for older women, they found that there was little information amongst the growing body of literature on violence against women that addressed the issues of violence and abuse in the lives of older women. Further exploration by the Society demonstrated that in research and practice, abuse in the lives of older women is usually treated as elder abuse. To better understand the realities of the lives of older women in British Columbia, the Society undertook a research project that drew from the experience of abused older women's knowledge that would ultimately lead to improvements in service delivery, public and professional understanding of complex issues facing older women in abusive relationships. (*Silent and Invisible - A report on the abuse and violence in the lives of older women in British Columbia and Yukon 2001*).

This handbook's intended purpose is to carry out a key recommendation of the report that would assist service providers on the front lines to understand, recognize and demystify some of the ageing process and thus better support the unique needs of older women experiencing violence and abuse in their lives.

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Why Yet Another Handbook?

This handbook is about abuse of older women and is intended for service providers. It seeks not to blame the victims.

There are handbooks on services for abused women, written primarily, if not entirely, from the perspective of the needs of and services for younger women, often with young children. Older and younger women have many things in common, but there are also differences in needs, perceptions and opportunities.

There are handbooks about elder abuse. This term ‘elder abuse’ is gender-neutral, which obscures the fact that about two-thirds of the victims are women, and denies the realities of power and control issues in intimate relationships. The term ‘elder abuse’ conceptualizes the problem as rooted in the specific context of the victim in terms of their vulnerability and dependence.

We recognize that issues which become increasingly common with age, including dementia, mobility, vision and hearing problems and other age-related disabilities, must be addressed by those providing services to older women. Recognition means not ignoring them, and not ignoring women who have such issues and are abused. For service providers this means linking with the services of health professionals when the need for their skills and knowledge is paramount.

The spectre of “blaming the victim” thrives in ageist and sexist environments. Both ageism and sexism are associated with abuse and neglect of older women. Blaming victims for being too needy relieves perpetrators

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of their responsibility for abusive behaviour. Victims of abuse deserve help and support, not blame.

By examining the issues of violence and abuse in the context of gender and age, this handbook will assist front line service providers working to support all women who are victims of violence and abuse.

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Medical Services Plan

Greater Vancouver and area 604-683-7151
Greater Victoria and area 250-386-7171
Elsewhere in B.C. toll free 1-800-663-7100

Abuse by Children

When the issue of abuse by an adult child or grandchild becomes apparent, contact the Public Guardian & Trustee's Office. For the appropriate referral source in your area, call 604-660-4444; website: www.trustee.bc.ca

Sexual Assault

For sexual assault issues, contact the Provincial Victims Information Line at 1-800-563-0808 or a rape crisis centre by consulting the Yellow Pages under Women's Organizations, or call B.C. Association of Specialized Victim Assistance & Counselling Programs (BCASVACP) at 604-633-2506 in Vancouver.

Family Violence Resource Centre

Provides resources in the area of family violence and sexual abuse, with a special emphasis on First Nations issues. Contact: 604-873-3772 local 312 in Vancouver or 1-800-667-3230.

Community Response Network

Abuse and neglect of older adults is covered under Part Three of the Adult Guardianship Act. The Public Guardian and Trustee, by regulation, has designated regional health authorities and the Ministry for Children and Family Development to work together to look into

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reports they receive about abuse or neglect. In very serious circumstances, and in keeping with the principles of the legislation, designated agencies can gain access to adults, and can obtain court orders to provide various supports and assistance to Adults.

As well, the Public Guardian and Trustee has supported approximately 55 communities around BC to develop Community Response Networks (CRNs) to coordinate responses to abuse and neglect at the community level. The idea of CRN is that individuals, groups and agencies come together to assist and support vulnerable adults. The new legislation provides a framework in which community members can support each other and involve the people they serve. The CRN can provide a foundation for the community to work together as a team. Since 1994, Community Response Networks have expanded throughout BC and now include an estimated fifty-five communities.

Indian Homemakers' Association of BC

Regional head office for First Nations women's organization made up of ten distinct locales in BC concerned with socio-economic issues. Provides addiction, family education, crisis, and family violence counselling. Contact: 604-876-0944 in Vancouver.

Housing

Older abused women may be eligible for Priority Placement with B.C. Housing. S.A.F.E.R. (Shelter Aid for Elderly Renters) may provide some financial assistance. Contact 604-433-2218 in the Lower Mainland; 1-800-257-7756 outside the Lower Mainland.

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Practical Assistance

For guidance to women who have never had bank accounts, written cheques or who have no idea of how to begin the process, contact a local Senior's Centre.

Accessibility

Information/directions on changes to the physical structure of the shelter, i.e.: size of entranceways, bathrooms, elevators, can be found in a publication entitled "*Meeting Our Needs: Access Manual for Transition Houses*" published by DAWN Canada (Disabled Women's Network Canada).

Language

In some rural areas, appropriate translation can present difficulties. Vancouver & Lower Mainland Multicultural Family Support Services Society provides services in over 25 languages and may be able to assist in connecting you with a translator or appropriate resources. Contact: 604-436-1025 in Burnaby.

Transportation Information

Bus Pass Program:

Greater Vancouver and area	604-682-0391
Greater Victoria and area	250-387-4331
Elsewhere in B.C. toll free	1-888-661-1566

Transit Seniors' Fare Discount:

Vancouver Region (Translink)	604-453-4634
Victoria Region (B.C. Transit)	250-382-6161

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Victoria Region (B.C. Transit)	250-382-6161

**handyDART Custom Transit - B.C. Transit/
Translink:**

Call handyDART listed in the white pages of your telephone book, or call:

Vancouver Region (Translink) 604-453-4634

Victoria Region (B.C. Transit) 250-385-2551

Call B.C. Transit for referral to local transit operators elsewhere in B.C.

250-385-2551

Enquiry BC

Enquiry BC is the resource center for the Provincial Government. For information and to be connected to a provincial ministry or program, contact 604-660-2421 in the Lower Mainland; 1-800-663-7867 outside the Lower Mainland; TTY only: call no charge 604-775-0303; website: www.gems3.gov.bc.ca; email: EnquiryBC@gems3.gov.bc.ca

Provincial Benefits

For information on provincial benefits, contact Enquiry BC and they will connect you to the appropriate office.

- Gain Seniors Benefit
- Temporary Emergency Relief
- Family Maintenance Enforcement Program

The Office for Seniors, Ministry of Health has a booklet entitled: *Information for Seniors – Your Guide to Programs and Benefits in B.C.*
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Federal Benefits

1-800-622-6232; TTY only 1-800-465-7735

website: www.canada.bc.ca;

Seniors Canada On-line: www.seniors.gc.ca for Seniors related information

➤ Canada Pension Plan (CPP) including CPP Disability and Old Age Security (OAS);
1-800-277-9914; TTY only 1-800-255-4786;
website: www.hrhc-drhc.gc.ca

➤ War Veteran's Benefits (Veterans Affairs Canada)
Vancouver District Office Enquiries: 604-666-7942; or
call no charge 1-800-647-1822;
website: www.vac-acc.gc.ca

➤ Aboriginal Affairs – 1-800-665-9320 (for
information in English) 1-866-775-6190 (for
information in French)

Legal Information

For legal information, information and resources on
aspects of abuse and neglect of seniors, contact:

B.C. Coalition to Eliminate Abuse of Seniors
304-5050 Kingsway Street, Burnaby;
telephone 604-437-1940; fax 604-437-1929

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**Community Resource
Telephone List
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*Please fill in the local numbers for the
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Police/RCMP _____

Hospital/Emergency _____

Public Health Unit _____

Transition House/Shelter _____

Women's Centre _____

Victim Assistance _____

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Older Womens' Support Group _____

Seniors' Housing Information _____

Home Support Services _____

Meals on Wheels _____

Seniors' Organizations/Centres _____

First Nations Organizations _____

Immigrant/Refugee Organizations _____

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