

SEXUAL ABUSE OF OLDER ADULTS: A FACT SHEET FOR CAREGIVERS, SERVICE PROVIDERS, FRIENDS, AND FAMILIES

WHAT IS SEXUAL ABUSE OF OLDER ADULTS?

Any sexual behaviour directed towards an older adult without their consent. Sexual abuse of older adults is best viewed as occurring along a continuum of hands-off to hands-on behaviours. These behaviours may include, but are not limited to:

Inappropriate or harassing sexual comments, jokes, or suggestions

Forced viewing of pornography or masturbation

Unwanted kissing or touching

Unwanted discussions of sex, or sexualized activities

Exposure of one's private body parts to an older person without their consent

Harmful or unnecessary genital hygiene practices

Taking explicit photos and sharing photos/videos online

Fondling

Coerced nudity

Forced vaginal penetration

Forced oral sex

Forced anal penetration

WHO IS AT RISK?

Older adults living in the community:

- Women
- Those living alone
- Those with physical weakness, frailty
- Those who are dependent on others

Adults in long-term care settings:

- Women
- Those who are 79 +
- Those with cognitive impairments
- Those who are dependent on others

WHO ARE THE PERPETRATORS?

Although stranger-perpetrated sexual abuse does occur, sexual abuse of older adults is typically perpetrated by males who are well-known to their victim(s). They can include:

- Caregivers such as nurses, aides, PSW's, or other formal/ informal caregivers
- Male family members, (e.g. adult children, grandchildren, or nephews)
- Spouses or partners
- Other residents in care facilities
- Volunteers or other staff at LTC facilities
- Strangers

GENERAL CHARACTERISTICS OF ABUSE

While not necessarily definitive of sexual abuse, the following characteristics or red flags may be useful in identifying a potentially risky or abusive situation. Recognizing these characteristics can help caregivers provide adequate and appropriate support to victims.



Characteristics to watch for in potential victims

- Self-disclosure of sexual abuse
- Frequent changes in doctors, or ‘Doctor shopping’
- History of missed appointments and/or a delay in seeking medical care
- Frequent visits to ER, doctors office, or clinics with unexplained injuries

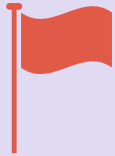


Characteristics to watch for in potential perpetrators

- Doesn’t want to leave the patient alone with the health care provider
- Behaves aggressively towards the older person, or treats them rudely, or like a child
- Makes decisions without consulting the older person
- Refuses to allow diagnostic tests or hospitalization for the older person
- Inconsistency or conflicting information provided by the caregiver (e.g. caregiver says they give medication as directed, but patient has very low quantities of medication in their system)
- Is evasive, defensive, or hostile when questioned directly
- Evidence of marital conflict, instability, or familial discord
- Lack of understanding of the aging process, or expression of an ageist attitude

HOW TO DETERMINE IF AN OLDER ADULT HAS BEEN SEXUALLY VICTIMIZED?

Many victims do not disclose or verbalize their sexual abuse experiences.



Researchers have suggested that caregivers, family members, and health care providers be aware of the following signs or red flags that could potentially indicate sexual victimization:

- Behavioural changes, including isolation, anxiety, anger, irritation, or hostility
- Emotional cues such as unexplained crying, rocking, shaking, or perspiration
- Physical cues such as genital tears or lacerations, injuries, bruises, abrasions, STI's
- Pain or itching in genital areas
- Exacerbation of existing medical conditions
- Refusing care or increased agitation during dressing, bathing, or perineal care
- Changes in appetite or sleeping patterns including excessive sleeping or insomnia
- Expressions of fear or avoidant behaviours towards male staff or male residents
- Movements consistent with genital injuries such as difficulty walking, sitting, or eliminating
- Wearing multiple layers of clothing
- Suicide attempts and/or other forms of self-harm

WHAT TO DO IF YOU BECOME AWARE OF SEXUAL ABUSE?

- **Consider the needs and desires of the victim**, and whether he/she wants intervention
- **Address immediate safety issues:**
 - *Do not enquire about abuse in the presence of the suspected abuse*
 - *If the victim has been injured, determine if they require medical attention*
 - *Determine if the victim can self contact police, shelters, or other emergency services*
- Express sympathy and empathy, and **do NOT blame the victim**
- **Consider reporting abuse to police**
- **If you are a medical professional**, follow appropriate protocols for reporting abuse.
- **Be aware of community resources** for intervention and counselling, and direct or assist the older person in accessing these resources.
- If the victim lives with the abuser and they are currently not prepared or able to terminate the relationship or seek alternate living arrangements, **help them create a safety plan.**

SAFETY PLAN

Safety plans should include:

- Identifying a safe place to go to, including identifying the locations of shelters, hospitals, or other community support services
- Having a list of emergency numbers, medications, and taxi/travel money ready
- Planning for the care of animals if an older person has pets
- Any other relevant safety planning measures that are applicable for the victim

*This fact sheet was created as part of the CNPEA project
Increasing Access to Justice for Older Victims of Sexual Assault*

*Also available: Sexual Abuse in Later Life - A Fact Sheet for Older
Adults*

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**For more information about this project and for additional
resources, visit www.cnpea.ca**

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