

ACCESS TO JUSTICE FOR OLDER VICTIMS OF
SEXUAL ASSAULT

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RESEARCH SNAPSHOT



BY

AMY PEIRONE
MYRNA DAWSON

CNPEA  RCPMTA

CANADIAN NETWORK for
the PREVENTION of ELDER ABUSE
RÉSEAU CANADIEN pour la PRÉVENTION
du MAUVAIS TRAITEMENT des AÎNÉS

WHAT IS THIS RESEARCH ABOUT?

The proportion of Canada's aging population is expected to double by 2060. Those 65 years and older are expected to account for more than one-quarter of the population. As people age, dementia and other cognitive and physical impairments result in increasing dependence. As a result, older persons are vulnerable to different types of abuse, including sexual abuse.

This dependency and vulnerability is particularly evident in long-term (LTC) settings. LTC residents are vulnerable to abuse by staff and other residents. To date, research has focused primarily on abuse between residents and caregivers, leaving a gap in our knowledge about the nature or extent of LTC resident-to-resident abuse in Canada. This type of abuse can take the form of sexual, verbal, material, or physical abuse between residents.

Resident-to-resident abuse is more difficult to classify and identify than abuse by caregivers. It does not align well with standard elder abuse definitions because the relationship between those involved is not characterized by dependence and both the victim and perpetrator often suffer harm. Although reported rates tend to vary, this form of abuse has considerable consequences; therefore, research designed to assess, prevent, and manage abuse in LTC homes in Canada is a priority.

WHAT DID THE RESEARCHERS DO?

Researchers used mixed methods to explore the nature of resident-to-resident abuse in LTC homes including frequency, risk factors for victimization/perpetration, and recommendations for prevention. They conducted a scoping review of peer-reviewed and grey literature (1985-2013) and a secondary analysis of data reports and Canadian data documenting cases of abuse in LTC homes in 2011.

WHAT DID THE RESEARCHERS FIND?

SCOPING REVIEW

Of the 32 relevant articles identified, almost all were US studies, but two were conducted in Canada. The most common types of resident-to-resident abuse identified included verbal, physical, and sexual abuse. Researchers found that reported rates of resident-to-resident abuse differed depending on the data and methodology, however, so conclusions are difficult. Anywhere from less than one percent to 41 percent of nursing home residents were involved in this type of abuse.

With respect to sexual abuse, several studies examining adult protective services' reports found that almost 70 percent of perpetrators were other residents. Another study showed that about 15 percent of sexual abuse cases heard in civil court involved resident-to-resident abuse. As such, residents appear to represent the most frequently-substantiated perpetrators of sexual abuse in nursing homes.

Resident-to-resident abuse, including sexual abuse, occurred most often in the resident's room or in public areas during the day or early evening. The most common forms of sexual abuse were described as fondling, exposure of private body parts, unwelcome sexualized kissing, discussions of sexualized activities, attempting to get into bed with another resident, verbal sexual abuse, and inappropriate interest in another resident's body.

Environmental characteristics such as crowding, invasion of personal space, communication barriers, and other stressors arising in shared social and residential settings contributed to abuse. While common responses were to separate residents, staff rarely consulted with physicians to address aggression or violent behaviours among residents.

Women are most often the victims of LTC home resident-to-resident abuse. Men are most often the initiators or perpetrators. Other victim risk factors include cognitive and physical impairments and wandering behaviours. Risk for perpetration is heightened among those who have cognitive impairments. For instance, residents in Alzheimer's units have been found to have higher instances of hypersexualized aggression compared to other residents.

Cognitive impairments impact disclosure and reporting rates because victims may not be able to report the abuse. It is often difficult to substantiate cases of suspected abuse with cognitive impairments and, in many cases, staff are unaware of how to respond. However, research shows that, when given appropriate training, staff can be better equipped to recognize, report, and respond to such cases.

SECONDARY DATA ANALYSIS

Results yielded a total of 6,455 cases of resident-to-resident abuse in 2011, representing almost one-third (28%) of abuse cases in LTC homes in Canada*. Abuse incidence forms from redacted data were obtained from Saskatchewan, Manitoba, New Brunswick, and Nova Scotia (N=662), showing that 29 percent were clear cases of resident-to-resident abuse, and of these cases, almost one in five (19%) involved sexual abuse. These results suggest that almost one-third of abuse cases in LTC homes in Canada may be cases of resident-to-resident abuse and a substantial proportion involves sexual abuse.

*No data from Yukon, Northwest Territories, or Nunavut.

HOW CAN YOU USE THIS RESEARCH?

GOVERNMENT ORGANIZATIONS can use this research to underscore the need for a national prevalence study of resident-to-resident abuse in LTC homes in Canada. This study can provide information not only on the frequency of this type of abuse, but also on the associated social, health, and economic consequences of the different types of resident-to-resident abuse in Canada.

NURSING HOMES ADMINISTRATORS can use this research to understand the importance of training and education for staff and family members of LTC residents. Understanding the realities of resident-to-resident abuse, including that dementia is not an excuse for hypersexualized or aggressive behaviour, is integral to prevent, manage, and respond to these instances.

VIOLENCE PREVENTION ADVOCATES can use this research to lobby the government to develop and implement a national policy on resident-to-resident abuse in LTC homes in Canada. Low levels of disclosure and criminal justice involvement highlight standardized reporting practices are needed as well as responses for preventing, minimizing, and addressing resident-to-resident abuse. Reporting guidelines should be clearly articulated, as well as the appropriate response procedures and policies for responding to this type of abuse.

WHAT YOU NEED TO KNOW

The literature on resident-to-resident abuse in Canada is scarce; however preliminary estimates suggest that this type of abuse is highly gendered, and accounts for approximately one-third of abuse cases in LTC homes in Canada.

Despite this, there remains substantial gaps in our knowledge on the nature of resident-to-resident abuse, and on the practical ways in which to prevent, manage, and respond to cases of resident-to-resident abuse in LTC homes.

ARTICLE CITATION

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This is the first in a series of Research Snapshots
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Each Snapshot features a relevant research study or resource from
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