

Report

Falling Between the Cracks: Abuse and Violence Against Older Women

*Marking World Elder Abuse Awareness Day
10 years on*

15 June 2015

Side Event
Human Rights Council, 29th session

Geneva

NGO Committee on Ageing

GENEVA



**Mandate of the Independent Expert on
The Enjoyment of All Human Rights by
Older Persons**

World Elder Abuse Awareness Day (WEAAD), designated as 15 June, was initiated by the International Network for the Prevention of Elder Abuse (INPEA) in 2006, and recognised as a United Nations Day by the General Assembly in its resolution A/RES/66/127 adopted in 2011.

The NGO Committee on Ageing, Geneva and the Office of the High Commissioner for Human Rights (OHCHR) organized a side-event to mark WEAAD on 15 June 2015, first day of the 29th session of the Human Rights Council, at the Palais des Nations, the UN headquarters in Geneva at 12:00-14:00 in room XXV. The title of the event was: *Falling Between the Cracks: Abuse and Violence against Older Women*.

The event was sponsored by the United Nations Population Fund (UNFPA) and the Permanent Missions of Argentina, Austria, Brazil, Canada, Israel, Mozambique, Slovenia, Spain and the United States of America.

The event was made accessible with captioning and interpretation into French and English thanks to the support of the Permanent Mission of Israel.



The event programme included presentations by a distinguished panel followed by interventions from the floor.

Opening words:

- **Natacha Foucard**, Chief a.i., Groups and Accountability Section, Special Procedures Branch, OHCHR
- **Susan Somers**, President, INPEA

Speakers:

- **Rosa Kornfeld-Matte**, Independent Expert on the enjoyment of all human rights by older persons
- **Rashida Manjoo**, Special Rapporteur on violence against women, its causes and consequences, represented by Nathalie Stadelmann, OHCHR
- **H.E. Regina Maria Cordeiro Dunlop**, Ambassador, Permanent Representative of Brazil to the UN in Geneva
- **Francelina Romao**, Health Counsellor, Permanent Mission of Mozambique
- **Silvia Perel-Levin**, Chair, NGO Committee on Ageing, Geneva
- **Bridget Sleep**, Senior Rights Advisor, HelpAge International

Moderator: **Alanna Armitage**, Director, UNFPA, Geneva



Event Summary

In her opening remarks, moderator **Alanna Armitage** said that elder abuse remains a largely taboo subject and violence against older women often falls between the cracks of laws, policies and programmes. She said the event would analyze the common features of elder abuse and the intersection with other personal violence as well as the specificities of violence against older women. She mentioned that this is especially relevant as violence against women would be discussed in the coming weeks at the Human Rights Council.



Natacha Foucard, Chief a.i. of the Groups and Accountability Section, Special Procedures Branch, OHCHR, which supports the work of the Independent Expert on the enjoyment of all human rights by older persons, said that World Elder Abuse Awareness Day serves as a yearly reminder to ourselves of the suffering of our older populations worldwide. It is also a chance to voice our continued opposition to the abuse and violence against them. She stressed that all forms of abuse and violence against older persons - be they physical, sexual, psychological, emotional or financial - are an unacceptable attack on human dignity, which is the core principle of human rights.

Natacha Foucard said that according to the World Health Organization, between four and six per cent of older persons worldwide have suffered from some form of elder abuse. Although progress has been made, with a better recognition of



the need to prevent elder abuse in many countries with the adoption of national policies, 10 years later, the subject continues to be under diagnosed and overlooked with little recognition and response. It is a taboo, often undetected, mostly underestimated and still ignored by societies across the world. It is therefore not only a public health and social issue, but also a human rights concern. As such, it demands a global multifaceted and multi-sectorial response that is focused on the promotion and protection of the rights of older persons.

She further highlighted the importance of adopting a comprehensive human rights-based approach in order to identify older persons as rights-holders and States and other stakeholders as duty-bearers with obligations under the current international human rights framework. She stressed that States should adopt and implement laws and strategies to address and punish all forms of abuse and violence against older persons. There must be an end to practices and customs that encourage or tolerate such violence against them, such as widowhood rites. In this sense, particular attention should be paid to older women due to widespread discriminatory attitudes that they have suffered throughout their lives, from their partners or family members.

She stressed that all strategies must also include the participation of older persons, including older women, in order to create preventive and detection mechanisms and offer protection and services adapted to their needs. She concluded by saying that this side

event was an important occasion to promote joint efforts and renew our commitment. It brings together UN human rights experts, representatives from UN agencies, civil society and States in the pursuit for concrete solutions to tackle this global scourge, by working together to sensitize and raise public awareness and increase political will and resources for preventing and ending all forms of abuse and violence against older persons.

Susan Somers, President of the International Network for Prevention of Elder Abuse and co-chair of the sub-committees on Elder Abuse and Older Women of the NGO Committee on Ageing in New York, said that over a decade ago in the seminal work on elder abuse, "Missing voices: views of older persons on elder abuse" (2002), WHO and INPEA had framed elder abuse as "a single or repeated act or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person".

She said that since then we have all come to the realization that elder abuse is a multi-faceted global phenomenon, underscored by ageism, gender bias, stereotypical beliefs and assumptions of older age, which are all barriers to the full realization of the human rights of older persons.

Susan Somers mentioned that elder abuse has been called a last taboo. Today is a watershed moment that we are all gathered here together with the Office of the High Commissioner for Human Rights and a new Independent Expert on the enjoyment of all human rights by older persons, distinguished representatives and Member States, UN agencies and intergovernmental organizations. She said that this reflects the paradigm shift we have been working towards from viewing older persons as frail, weak and vulnerable in need of charity and welfare to where older persons are acknowledged as rights holders.

She stressed that we can't rest now. Although the state has a primary responsibility, the responsibility to protect vulnerable older persons is a shared one. And on this day INPEA calls upon all nations: "to take appropriate action" to eradicate age discrimination and ageist policies that condone and contribute to violence, neglect and abuse of older persons, in particular against older women and widows, to take affirmative action so older persons may equally and fully participate in society, and live in dignity and security.



Rosa Kornfeld-Matte, the Independent Expert on the enjoyment of all human rights by older persons, said that abuse and violence against older persons has recently gained attention at the international, regional and national levels. Abuse and violence encompass the various forms, practices, perceptions and assumptions that exist in different groups across and within societies. In that sense, it should not only encompass physical, sexual, psychological, emotional and financial abuse but should extend to exploitation, neglect, abandonment or desertion, among others. Practices of abuse and violence can be the result of social, economic, cultural and political structures that could directly or indirectly lead to the marginalisation of older persons by their families and societies. It is a global problem that occurs everywhere, regardless of socioeconomic status, in poor and rich families, in developed and developing countries. Therefore, it is important to consider elder abuse as part of a broader objective to improve the conditions of life for older persons and to respect their dignity.

She said that, as the first Independent

Expert on the enjoyment of all human rights by older persons, she has been mandated by the United Nations Human Rights Council to assess the implementation of existing international instruments with regard to older persons in order to ensure that older persons enjoy all their human rights, whatever the circumstances. She has also been requested to raise awareness of the challenges faced in the realization of all human rights by older persons and to ensure that older persons receive information about those rights.



Rosa Kornfeld-Matte said that, since the beginning of her mandate, she has made elder abuse one of her priorities. She added that, in the first report that she presented to the Human Rights Council last year, she adopted a comprehensive approach to ageing, which included pressing issues such as the right of older persons to live free from abuse and violence.

She reported that during the three official country visits that she conducted recently to Slovenia, Austria and Mauritius, she assessed how each of these States have, so far, addressed the issue of elder abuse, through a deep analysis of laws, policies, programmes and strategies, and the identification of gaps as well as good practices. The reports of these official visits, with conclusions and recommendations, will be shared in September 2015. Her first thematic report on autonomy and care that will be presented to the Human Rights Council in September will also include the situation of abuse and violence against older persons in different care settings.

The Independent Expert added that she has been mandated to assess the human rights implications of the implementation of the Madrid International Plan of Action on Ageing (MIPAA). This plan makes explicit reference to neglect, abuse and violence, and establishes a series of recommendations to States and other stakeholders to tackle these challenges.

Among the actions, the plan mentions the sensitization of professionals and education of the general public, using media and other awareness-raising campaigns on the subject of elder abuse, with particular attention to older women. It specifically mentions that older women face greater risk than men of physical and psychological abuse due to discriminatory social attitudes and the non-realization of human rights of women. Also, that some harmful traditional and customary practices result in abuse and violence directed against those who might face barriers such as poverty and lack of legal protection. The plan further encourages the abolition of widowhood rites that are harmful to the health and well-being of women.

She added that any policy, plan or strategy should adopt an age perspective as well as a gender and disability perspective. This framework should address the root causes and develop preventive mechanisms, including redress mechanisms in order to hold perpetrators accountable for their acts.

In addition, the plan recommends actions to support services to address elder abuse, such as the establishment of health and social services, and the development of training programmes for caring professions and to empower older persons. In this context, any policy, plan or strategy should take into consideration the contribution and participation of older persons in order to assess their needs and break the taboo that still persists in our societies. She said there is a human cost to our inaction.

*Falling Between the Cracks: Abuse and Violence against Older Women
Marking World Elder Abuse Awareness Day – 10 years on*

She asked: "Have all States adopted legislation in order to translate their international obligations into concrete action at the national and local levels? Do we have regulatory and institutional mechanisms to move forward that allow older persons to manifest their mistreatment without fear of retaliation? If and when appropriate, are these mechanisms implemented in rural and remote areas?"

Rosa Kornfeld-Matte said that one of the main challenges that she has already come across is the lack of large-scale research, indicators, and the systematic collection and analysis of data. Records of abuse and violence are difficult to obtain or are sometimes confidential.

The Independent Expert mentioned that she has sent out a questionnaire to all States and other stakeholders in order to assess the human rights implications of the implementation of the Madrid International Plan of Action on Ageing (MIPAA). She commended States and stakeholders who have already sent responses to the questionnaire and invited those who have not yet responded to send their inputs. Considering the lack of information and data, all responses will be extremely helpful and will contribute to the comprehensive report that she will present next year to the Human Rights Council.

She claimed that simply being aware of elder abuse is, in itself, not enough. We need to work together to help promote a change in attitudes, where being old should no longer be seen as pejorative but as positive. For that to happen, it is important to facilitate and actively encourage intergenerational dialogue.

In conclusion, on this World Elder Abuse Awareness Day, the Independent Expert called on all Governments and other stakeholders to renew their commitment to fight against all forms of abuse and violence against older persons and to promote all their human rights. Older persons are rights-holders and must be able to live free from abuse and violence

and with dignity. States, civil society, the private sector, the media, the entire UN, associations of older persons and for older persons must join forces in addressing this global challenge.



H.E. Ambassador Regina Maria Cordeiro Dunlop, current Permanent Representative of Brazil to the UN in Geneva, said the demographic profile of Brazil has experienced dramatic changes in the last 20 years as have many parts of the world. According to the Brazilian census in 2010, the population of older persons is the fastest growing group in the country, a phenomenon that imposes new challenges for society.

She said that in Brazil, women are living longer than men and are more likely to be alone. Widows find themselves in disadvantaged socio-economic situations, since a considerable number of them have never engaged in paid work in their adult life. She also mentioned that perhaps this will change gradually as more women, particularly younger women, are engaged in active paid work.

In the early 20th century the life expectancy in Brazil was 33.5 years, reaching 50 in the 1950s, and in 2011 the average was 74.08 years. Nowadays women outlive men by, on average, seven years. Although women live longer than men they face a longer period of physical impairment before they die. However, she said that, according to geriatric experts, older women are in general more socially active and often take the role of the main source of income and providers for the extended family.

*Falling Between the Cracks: Abuse and Violence against Older Women
Marking World Elder Abuse Awareness Day – 10 years on*

She said that the statistics in Brazil are worrisome and indicate that among the elderly women tend to suffer more socio and physical dependencies. Twenty per cent of them live under the responsibility of their relatives; 18.5% have no income at all; 17.5% are not able to perform the simplest daily activities.

Socio-economic problems take a toll on older women. In fact, they are the most vulnerable group among the poor and the elderly mainly due to the limitations of age and health related problems. Although violence against older persons affects the most diverse socio strata, women rather than men still live in the most vulnerable situations, which include physical, sexual, psychological, emotional and financial abuse, and neglect.



In Brazil, as in many parts of the world, abuse against and neglect of older women are commonly perpetrated by close relatives and/or caregivers. Therefore older women tend to resist pressing charges related to violence in domestic settings due to fear of disruption of family bonds, of abandonment and loneliness.

Older women are exposed to multiple situations of violence. Economic violence is a frequent violation of their human rights. It is mainly perpetrated by family members who try to manipulate banking or financial operations on behalf of the older person, impairing their autonomy and dignity.

H.E. Regina Maria Cordeiro Dunlop highlighted that another gender problem lies with the invisibility of women in the

legal and institutional mechanisms designed for the assistance of the elderly. Such a problem is magnified by challenges such as inclusion of older women in the public pensions system, since a considerable number of them have not contributed before and are not entitled to the pension. But in the last 20 years Brazil has carried out a profound paradigm change with a view to guaranteeing individual and collective rights of older persons.

She said that Brazil has taken significant strides in the implementation of relevant international instruments on the rights of older persons, including the Madrid International Plan of Action on Ageing (2002), which was incorporated into Brazil's National Health Policy for Older Persons in 2006. She mentioned Brazil's National Plan to Combat Violence against Older Persons and the National Commitment for Active Ageing. Brazil has played a leading role in the discussions on the rights of older persons, both at the regional and international levels. In 2013, the Human Rights Council adopted by consensus the Brazilian-Argentine initiative that created the mandate of the Independent Expert on the enjoyment of all human rights by older persons. Brazil has also been advocating for the rights of older persons within the UN Economic Commission for Latin American and the Caribbean (ECLAC), the Organization of American States (OAS) and MERCOSUR, covering the hemisphere at regional and subregional levels.

She highlighted Brazil's policies on gender equality, saying that the national plan for policies for women includes among its ten main axes special attention to older women, taking into account the impact of violence on all aspects of women's lives, including older women. Combatting violence was chosen as the main priority of the national plan.

She concluded that there is a robust legal framework available in Brazil for the protection of the rights of older persons, including the Statute of Older

Persons and the law that is popularly known as the Maria da Penha Law on Domestic and Family Violence, which regulates violence against women, including older women, in every aspect of domestic life.

A statement from **Rashida Manjoo**, Special Rapporteur on violence against women, was read by Nathalie Stadelmann, who supports the mandate of the Special Rapporteur at OHCHR. In her statement, Rashida Manjoo said that her mandate includes the analysis of violence against women at every stage of life. Through thematic research, country missions and consultations, she has identified and highlighted the certain specific situations of discrimination and violence suffered by older women.

She said that violence against older women begins in the home where it often remains an invisible and underreported phenomenon. There is a tendency to assume that domestic violence is mainly experienced by younger women at the hands of partners or spouses.

Driven by limited institutional definitions of the family, State responses to domestic violence have conventionally focused solely on spousal violence.¹ Therefore, there is no accurate data about the numerous manifestations and also the extent of domestic violence against older women perpetrated by a wider range of family members and caregivers. As mentioned by the Committee on the Elimination of Discrimination against Women (CEDAW) in its General Recommendation no. 27 on older women and protection of their human rights, many older women face neglect as they are no longer considered useful in their productive and reproductive roles, and are seen as a burden on their families.²

As with most cases of domestic violence, fear of retaliation, family or community pressure not to reveal domestic

problems, poor awareness of rights, lack of support services, economic dependency, and perceptions that the authorities will not respond adequately, are all factors that lead to the underreporting of such abuses.³

She added that, in terms of violence against older women in the community, she has witnessed how some manifestations are more prevalent against older women, such as violence related to widowhood and violence resulting from sorcery accusations.



She highlighted that, during her country mission to Papua New Guinea, she received alarming reports of violence perpetrated against persons accused of sorcery/witchcraft, with women being affected disproportionately, particularly older women who were widows and had no male kin to protect them. She was shocked to witness the brutality of the assaults perpetrated against suspected sorcerers, which in many cases included torture, rape, mutilations and murder. According to many interviewees, sorcery accusations are commonly used to deprive women of their land, property and/or their inheritance. Factors at the community level which allow for impunity for perpetrators include the unwillingness to intervene prior to, or during, such attacks, and the fear of reporting and/or providing information to the police.⁴

She added that, during her country mission to Zambia, she noticed how

¹ A/HRC/11/6/Add.5, para. 31.

² CEDAW/C/GR/27, para. 13.

³ A/66/215, page 28.

⁴ A/HRC/23/49/Add2, in particular paras. 31-40 and 64-66.

older women who were widows and/or living on their own were at a particularly high risk of violence, as they are often deprived of all assets, of family and community support, and are living in very precarious situations.⁵ In some contexts, customary practices dictate that a man's property traditionally returns to his birth family upon his death, so a widow's possessions might be seized with no regard to her health, well-being or ability to support herself.⁶ In some societies, older women are treated like children and brought back under the control of male leaders in the family or the community.

The statement said that the country mission report on Ghana by Rashida Manjoo's predecessor examined the practice of "levirate marriage" or "widow inheritance", which requires a widow to marry (formally or informally) her late husband's brother. This entails the remarrying of a widow within the husband's family or ethnic group but can also often include forcing a woman to have unprotected sex in order to "cleanse" her of the spirit of the deceased. In some communities, the woman is "inherited" by one of the sons born to another wife of the deceased husband. Although seen as a social support arrangement for the widow, this practice is violent against women as the new husband is permitted to have sexual relations with the widow, even against her will. Women are in no position to refuse as they could be violently ejected from their homes and left destitute.⁷ A thematic report by the Special Rapporteur on the intersections of violence against women and HIV/AIDS analysed the linkages between certain harmful cultural practices, including wife inheritance, and the contraction and the transmission of HIV/AIDS.⁸

In many cases, it is the State itself that

perpetrates violence against older women.



The most common manifestation of violence against older women in State institutions she has witnessed refers to the conditions faced by older women in institutional settings, such as prisons and detention centres.

While visiting a prison during a country mission to Italy, the Special Rapporteur met an older woman who was confined to an overcrowded, cigarette-smoke filled cell, and shared a bathroom with no access to hot water.⁹ She said that overcrowding and unhealthy conditions are common problems in prisons that she visits and, while these conditions affect all women and men, the specific consequences in terms of health and well-being for older inmates are rarely taken into consideration by prison authorities. Another example seen in a US prison is that of an older woman, who had enormous difficulty climbing up and down the high bunk bed that she was allocated in her prison cell.

Inadequate access to health services in prison and detention facilities is characterized by delays, neglect, and mistreatment of inmates and detainees. This has even more devastating effects for older women who are facing chronic health concerns. Not only do they face long delays in seeing a doctor, they also have to face intrusive and humiliating body searches every time they leave the prison facilities for therapy or hospital visits.¹⁰ At a federal prison in the United

⁵ A/HRC/17/26/Add.3, para. 14 and A/HRC/17/26/Add.4, para. 65.

⁶ A/HRC/11/6, page 21.

⁷ A/HRC/7/6/Add.3, para. 72.

⁸ E/CN.4/2005/72, para. 20.

⁹ A/HRC/20/16/Add.2

¹⁰ Ibid.

States, she met an older woman who had consistently complained of a lump in her breast but was only examined by a doctor eight months after her initial complaint. She was then immediately sent to surgery to have her breast removed and was facing chemo and radiotherapy treatment. Despite the willingness and possibility of her family to support her throughout her treatment, her petitions to be released on humanitarian grounds, based on her old age and her health situation, had been consistently rejected by the authorities.¹¹



She added that, in some societies, there has been a shift from caring for the elderly within the extended family home, to resorting to State sponsored, private or charitable long-term care facilities. This is sometimes also prompted by the inability or unwillingness of nuclear families to take care of elderly relatives with age-related physical and mental disabilities. In 2007, a report by the OECD confirmed that the rapid ageing of populations globally in the next decades will lead to increasing numbers of people at older ages with a severe disability and in need of long-term care.¹²

Other institutional settings, such as hospitals, nursing homes or assisted living settings can be places in which elderly abuse takes place. While some of these facilities may provide good services, challenges such as

understaffing, underpayment and poor training may lead to situations of neglect or even abusive treatment. Other risk factors include the isolation and exclusion from society in residential institutions. Women with intellectual and psychosocial disabilities, and in particular those living in institutionalized settings, are the most vulnerable to violence.¹³

Older women are not spared from the risks and heightened vulnerability to violence faced by women in the transnational arena. The transnational arena merely reflects the continuum of women's life experiences of discrimination and violence, but across state boundaries. Irregular women migrants, women asylum seekers and refugees are particularly vulnerable to violence occurring in these settings.¹⁴ However, for older women the risk is also present when they are left behind by migrating family members, whether due to economic and/or forced migration. Some of the consequences include the removal of younger workers and wage earners, who are the source of support on which many older persons rely, and the leaving behind of orphaned, sometimes sick and disabled people who must be cared for.¹⁵

Older women are especially affected by both of these outcomes because they generally control fewer economic resources than older men, and thus must rely more heavily on the support of younger adults, but also because the care of needy children and others is most likely to fall to them, in the absence of younger women to do the job. Therefore, even when an older woman does not herself undergo a situation of displacement or migration, she is still very likely to be severely affected by these phenomena.¹⁶

Regardless of the context and the

¹¹ A/HRC/17/26/Add.5, para. 38.

¹² Trends in Severe Disability Among Elderly People: Assessing the Evidence in 12 OECD Countries and the Future Implications, <http://www.oecd.org/dataoecd/13/8/38343783.pdf>

¹³ A/HRC/20/5, para. 15.

¹⁴ A/66/215, paras. 43-44.

¹⁵ See: WHO, Gender, Health and Ageing, at http://www.who.int/gender/documents/en/Gender_Ageing.pdf

¹⁶ Ibid.

specific manifestation of violence, older persons encounter barriers when attempting to report these abuses and access legal remedies. Factors such as poverty, illiteracy, lack of knowledge of their own rights, lack of information on where to seek advice and guidance, or language barriers, can prevent older people from accessing justice or from fully comprehending legal procedures when/if their cases are brought before a court.

Access to justice is also hindered by factors that disempower and increase the dependence of older people on other persons. Factors such as “the absence of mobility aids or assistive devices; laws that allow for the deprivation of legal capacity, resulting in the appointment of a legal guardian to make and express legally binding decisions; lack of access to information and counselling services; fear of reporting the abuse due to concerns about losing needed care; and fear of institutionalization if the abusive home environment is reported”, lead to impunity and to the invisibility and continuation of the abuse.¹⁷

In conclusion, Rashida Manjoo’s statement mentioned that her mandate has continually advocated for the adoption of a holistic approach that considers multiple and intersecting forms of discrimination. She has stressed that all women are at risk of violence in every society in the world, but not all women are equally vulnerable to acts and structures of violence. Violence against women results from a complex interplay of individual, family, community, economic and social factors.¹⁸ Likewise, older women are not a homogeneous group, but represent a great diversity of experiences, knowledge, ability and skills.

Their economic and social situation is dependent on a range of demographic, political, environmental, cultural, social,

individual and family factors.¹⁹ The multiplicity of forms of violence against older women as well as the fact that this violence frequently occurs at the intersection of different types of discrimination makes the adoption of multifaceted strategies to effectively prevent and combat this violence a necessity.²⁰



In her report, the Special Rapporteur argues for an approach that accounts for additional aspects of personhood, such as age, disability or socio-economic class, to predetermine the likelihood and extent to which women will experience multiple forms and various levels of discrimination and violence. This approach should guide the development of national strategies, concrete programmes and actions. It requires States to: (a) consider women’s human rights as universal, interdependent and indivisible; (b) understand violence against women within a continuum that spans interpersonal and structural violence; (c) acknowledge the structural aspects and factors of discrimination, including structural and institutional inequalities and; (d) examine social or economic hierarchies between women and men and also among women.²¹

She said that it is her hope that, as the international community analyses the existing human rights frameworks as regards the rights of older persons, identifies the current gaps, and reflects on how to better address them, it will continue to do so in a gender responsive manner. It must fully recognize and

¹⁷ A/HRC/20/5, para. 16.

¹⁸ A/HRC/17/26, para. 21.

¹⁹ CEDAW/C/GC/27, para. 8.

²⁰ E/CN.4/2006/61, para. 16.

²¹ A/HRC/17/26

*Falling Between the Cracks: Abuse and Violence against Older Women
Marking World Elder Abuse Awareness Day – 10 years on*

address the different stages of women's lives and the impact of discrimination and inequalities at each stage on the enjoyment of human rights by older women.

Dr. Francelina Romao, a medical doctor and public health specialist and currently the Health Counsellor at the Permanent Mission of Mozambique, shared the situation of older persons and elder abuse in Mozambique. She said that violence starts when a baby is still in the womb, when a mother is kicked or beaten or physically abused. And in infancy there are new challenges regarding violence against a female child who is deprived of food. She said that girls are not given food in the same way that boys are and they can start to be sexually abused. When they reach adulthood they are subjected to all types of violence that women suffer.

She said that when women become older they are faced with a new challenge. In Mozambique, if someone in the family gets sick or dies the older woman is accused of being the cause of it and accused of being a witch. She said that in one of the largest provinces in Mozambique, Zambezia, by 2009 there were approximately 30 reports of deaths of women accused of witchcraft.



She said that it is difficult to have accurate information about such deaths. The authorities in Zambezia, the traditional healers and civil society started working on the issue in 2009. Two organizations were formed, AVODEMO and AMETRAMO, where religious organizations came together

and started working with the community to stop violence against the elderly in general and women in particular. Two years after the campaign started, the number of deaths decreased by half and four years later there was only one death registered. For the past two years, no deaths have been reported.

She said that accusations against older women were originally made by traditional healers for financial gain and that the traditional healers themselves came together to stop this bad practice.

Traditional healers are using their religious principles to teach equality and the right to life as well as other human rights. It is a combination of preaching in church, talking with patients and addressing all families who have an older person with them. Meetings with local authorities were carried out to denounce the traditional healers who were still engaged in violent acts.

She stressed that in the past seven years traditional healers have started to be part of the formal health community network. They have learned how to prevent diseases, how to communicate with health centres. And in the past three years, material has been developed on the prevention of violence against women, a good basis for preventing violence against the elderly.



Usually many traditional healers do not read or write, which is the same for the rest of the population. They have to report all the cases that they see of elder abuse to the central health centre. A form was developed to find out which of the patient's rights were violated,

including physical violence, sexual violence and other violations.

She concluded that community intervention is showing good results but that there is still a long way to go. In July 2015, there is going to be a national meeting where all the traditional healers will be present to discuss how to scale up this experience so that at least this type of violence is not going to happen anymore.

Silvia Perel-Levin, Chair of the NGO Committee on Ageing in Geneva, representing the International Longevity Centre Global Alliance and INPEA, said that tackling violence against older women entails identifying normative gaps and also identifying global knowledge gaps.

She asked, when we talk about violence against older women, is it elder abuse? Is it domestic/family violence? Is it Intimate Partner Violence? Is it all of the above? We should not just ask these questions but should rather create the capacity to help women of all ages in any system they feel comfortable with and respond to their needs.

She highlighted that health and social care professionals, mostly in the UK and the US, have developed definitions of elder abuse and categories that are widely used: physical, psychological/emotional, financial, sexual and neglect. A strong focus has been placed on caregiving and caregiver stress, reflecting the fact that elder abuse has been mostly defined and conceptualised by professionals who deal with frail and vulnerable populations. But people who are vulnerable are not necessarily at risk, and people who are at risk are not necessarily vulnerable.

When abuse is only described as happening within a "care" relationship, it is implied that they are to be understood and not punished. The focus on the "caring" fixes the attention on frailty and not on the context of family and partner violence or the wider contexts of sexism and ageism.

She said that gender issues too often become obscured. The widely used definitions and categories are both gender-blind and detached from cultural contexts. When older women and men are asked about abuse, they often place it within a societal level of social exclusion, violation of human rights and loss of autonomy and dignity.

Women generally live longer than men; there are more old women than old men. But it is critical to see the abuse of older women not just within the context of numbers and population ageing but in the context of a life course of discrimination, oppression and abuse where men use violence as a way to demonstrate power. The societal abuse and discrimination that older women suffer in some societies, such as property grabbing, forced marriages, accusations of witchcraft, ejection from their homes, need to be recognized, denounced and eliminated.



Abuse of an older woman by her partner constitutes Intimate Partner Violence. She may have suffered it throughout her married life. Or she may suffer it with her new partner. Or she may suffer "late onset domestic violence" that began in old age. A strained relationship or emotional abuse may have got worse as the partners have aged.

She said that many of the risk factors present in abusive couple relationships are the same regardless of age and the majority of reported abuse among older couples has in fact been going on for a long time. But when abuse begins or is exacerbated in old age, it can be linked to some specific milestones in life such as retirement, changing roles of family members, dementia, menopause and

sexual changes, medications.

Older women victims of Intimate Partner Violence or sexual abuse mostly fall between the cracks and are generally overlooked by both the women's and older people's service systems.

Violence against women programmes generally serve women under 50 while geriatric medicine, social and adult protective services, where they exist, have focused primarily on the frail and most vulnerable. Researchers have too often excluded older women from their target populations, reinforcing the perception of older women as frail and sexless.

While in Europe or the US, sexual abuse has often been considered to be around one per cent prevalence, a report by Oxfam on sexual violence in the Democratic Republic of Congo shows that women of any age are victims of rape as a weapon of war. Over 10 per cent of the women that received care at the Panzi hospital between 2004 and 2008 were older than 65. Another five per cent were between 55 and 66.²²

She mentioned that the 2014 European Agency for Fundamental Rights (FRA) report of an EU-wide survey on violence against women, which included women from 18 to 74 years old, shows higher rates for older women than previous studies.²³

Several European studies were performed with grants from the European Commission. In the Prevalence Study of Abuse and Violence against Older Women, a multi-cultural survey conducted in Austria, Belgium, Finland, Lithuania and Portugal, an overall prevalence of 28 per cent was found including all types with varieties in

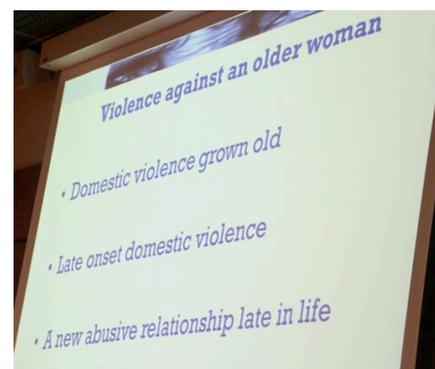
²² *Now, the world is without me: An investigation of sexual violence in Eastern Democratic Republic of Congo*, Report by the Harvard Humanitarian Initiative with support from Oxfam, April 2010.

²³ *Violence against women: an EU-wide survey. Main results report*, European Agency for Fundamental Rights, 2014.

different countries.²⁴

A 2013 WHO review of global estimates of violence against women showed higher rates among older women while lower than those of younger age groups. It also mentions large confidence intervals among the older women's groups and the fact that this data comes from a small number of studies primarily from high-income countries. For this reason, one cannot conclude that older women experience lower levels of partner violence but rather we do not know enough.²⁵

Some countries have performed elder abuse studies but without proper disaggregation of cohorts. It is clear that the small samples and the different methodologies used for measuring prevalence have created numerous difficulties in understanding the full scope of the problem. Lack of reliable data has hampered the development and evaluation of effective interventions. Just increasing the age to include older women in surveys has methodological challenges. Unless the samples are much larger, the realities of older women may not be properly reflected. This reinforces the need for specific studies on women over the age of 50 to be conducted.



²⁴ Luoma, M.-L et al (2011). Prevalence Study of Abuse and Violence against Older Women. Results of a Multi-cultural Survey in Austria, Belgium, Finland, Lithuania, and Portugal (European Report of the AVOW Project).

²⁵ *Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non- partner sexual violence*. WHO 2013

She said that, despite the similarities across the life course, there are profound differences of approach as to the ways of interviewing older women, what kinds of interventions are appropriate and what services are available or needed. An older woman is more vulnerable to contract infections, bleed, break bones, and indeed die as a result of violence and, yet, the cause of death in an older woman is not analysed as carefully as the death of a younger one.

Because of stereotypes and the assumption that an older woman does not have sex, forensic examinations are not always conducted. However, lack of appropriate prevalence data should not be used as an excuse for lack of action. The multiplicity of forms of violence against older women and the fact that this violence frequently occurs at the intersection of different types of discrimination requires multifaceted strategies.

Silvia Perel-Levin asked, where do we start? She said we should make the invisible, visible. We should fight the stereotypes, ageism, sexism and wide discrimination that older women suffer. We should create good intergenerational space for women of all ages to prevent violence across the life course. We should include women of all ages in all discussions, interventions and services.

Naming, identifying cases of abuse may be a first step that professionals on the frontline can do. Primary Health Care (PHC) may be the only place of contact for many older women. As with Intimate Partner Violence, abused older women visit PHC more often. With higher risk and the rise of chronic diseases as people age, PHC becomes a usual and natural point of contact, implying an ongoing relationship of trust. But that trust can also be with social workers, police, lawyers, bankers, etc.

In conclusion, to bridge the gaps of knowledge and norms, she calls for an inter-agency UN population-based study on violence against older women and

men.

Bridget Sleaf, Senior Policy Rights Advisor at HelpAge International, focused her comments on how older women survivors fall between the cracks in terms of justice and redress and on the impunity many perpetrators continue to enjoy.

She said that if we are to understand and address this impunity we have to recognise the harmful, often dehumanising, ageist stereotypes and prejudices that are so prevalent across all societies today. This deep-rooted ageism came through very strongly in a consultation of older people across 50 countries carried out by the Global Alliance for the Rights of Older People at the end of 2014²⁶. Older women and men repeatedly said that they were considered useless, incompetent and a drain on resources by their families and by society. A woman in her seventies from the US summed it up when she said that *"There is a general ageism still in our culture that devalues old age relative to youth, that expects older adults to be decrepit and demented."*



And this can be exacerbated for women as we get older, as this same woman also recognised when she said: *"I think I will never get past second class – first because I am female and now because I am older."*

²⁶ *In Our Own Words, what older people say about discrimination and human rights in older age: A consultation by the Global Alliance for the Rights of Older People*
<http://www.rightsofolderpeople.org/wp-content/uploads/2015/03/In-Our-Own-Words-2015-English.pdf>

When we, as individuals, communities and society, no longer value women (and men) because of their older age, the result is that violence and abuse perpetrated against them is often denied, is tolerated and is allowed to take place with impunity.

That incidents of violence and abuse are not being reported to the authorities was a key finding in research that HelpAge conducted with women and men over the age of 50 in Peru, Mozambique and Kyrgyzstan.²⁷

In Peru, 20 per cent of the women that we interviewed reported experiencing sexual violence and abuse since the age of 50. None of them reported the incident to the police or another authority or even sought medical help. The vast majority of the perpetrators were a current partner or spouse.

In Kyrgyzstan, only one woman of those surveyed reported sexual violence. Four per cent of older people said they had been subjected to physical violence, 16 per cent to emotional abuse violence and 26 per cent to some form of financial abuse.

However, none of those subjected to sexual or physical violence reported the incident to the police or authorities, and the majority only told family and friends about the financial and emotional abuse they had been subjected to.

In Mozambique, we found that the majority of those who had been subjected to sexual and physical violence did not tell the police or other authorities. And whilst they seemed more willing to tell people about emotional and financial abuse, quite a few subjected to these forms of violence told nobody, not even family or friends.

But, said Bridget Sleaf, ending impunity is not the sole responsibility of the survivors of violence. The State also has a role to play but too often older women

(and men) fall through the cracks in terms of state responsibility as well. This is no better illustrated than in the World Health Organization, United Nations Office on Drugs and Crime and UNDP Global Status Report on Violence Prevention 2014. Of the 133 countries surveyed, only 59 per cent said they have laws to prevent elder abuse and of these only 30 per cent said that these were fully enforced. Legislation against elder abuse in institutions is even less common.²⁸ Adult protective services are consistently lacking across all regions with only 34 per cent of countries having any in place to investigate cases of elder abuse and provide support for survivors.²⁹ Public information and professional awareness campaigns are also limited or non-existent in the majority of countries.³⁰



This patchwork of protection and services means that the extent to which we enjoy our right to be free from violence in older age differs widely depending on where we live and undermines the fundamental principle of the universality of human rights. Such universality is further threatened by the absence of clearly articulated international human rights standards on freedom from violence and abuse in older age.

She concluded that the lack of data,

²⁸ Global Status Report on Violence Prevention 2014, WHO, UNODC, UNDP, page 39.

²⁹ Ibid.

³⁰ Global Status Report on Violence Prevention 2014, WHO, UNODC, UNDP, page 79.

²⁷ See <http://www.helpage.org/what-we-do/rights/>

legal protection, support services and effective means of seeking redress and justice alongside deep-seated, harmful ageist social norms create an environment where perpetrators are allowed to act with impunity and survivors of violence and abuse rarely get justice for the crimes committed against them.

Following the main panel presentations, the floor was opened to all participants for comments.

A delegate from **Argentina** referred to some advances in the international arena that have been taking place recently and the leading role that Argentina has been taking in these developments including the General Assembly resolution that designates 15 June as WEAAD and the strong resolution that together with Brazil, Argentina promoted at the Human Rights Council.

She said that the Inter-American Convention on protecting the human rights of older persons is ready and will be approved during the 45th General Assembly of the Organization of American States.

The Convention contains a definition of abuse and recognizes the rights to equality, non-discrimination, right to life and dignity, right to independence and autonomy, and right to participate in the community and a life free of violence against older people.



She highlighted Article 9 of the Inter-American Convention that defines violence against older persons. It

comprises, among others, physical, sexual, psychological mistreatment and expulsion from the community and other forms of abandonment and neglect that take place.

She also mentioned that within the context of the UN General Assembly the working group on ageing is chaired by Argentina. The succession will be taking place in July 2015. Since the beginning Argentina has been promoting the need to have an international Convention that protects the rights of older persons in accordance with Resolution 67/139 of the General Assembly.

The ambassador of **Israel** said that Israel is well aware of the complex phenomenon of abusing and neglecting older people, and is making significant efforts in the research and study of this phenomenon. Israel believes that the key to addressing this challenge most effectively is to have a strong linkage between research and policy.

In 2004, Israel was among the first countries that initiated a national survey which gave, for the first time, a research-based factual status of the situation. The issue of abuse of older women received special attention in various breakthrough studies conducted at Haifa University and other academic institutes. These studies involved in-depth interviews with victims of domestic violence and exposed the scope of this phenomenon. Following these studies, relevant ministries have issued specific guidelines on the ways and methods for treatment and intervention by health and social services in cases in which abuse of older people, and specifically women, are reported or identified.

The State of Israel continues to act on both the academic research level and the policy making level to prevent and reduce violence and neglect towards older women.

A delegate from **Slovenia** said that Slovenia attaches great importance to women's rights and the rights of older

persons and that these topics are high on the list of national priorities.

The delegate said that older women are particularly vulnerable to elder abuse and they face multiple and cumulative discrimination. While, on average, women in Slovenia live eight years longer than men they are much more likely to live in poverty and social exclusion. According to the first national study on women and partner relationships, conducted in 2010, the elderly, aged 60 plus, experienced different types of violence, namely physical, sexual, psychological and economic, and they experience this more frequently than women in general.



The delegate said that several projects have been implemented in Slovenia since 2013, including a two-year national campaign called "Vesna, to live a life free of violence". This campaign focuses on awareness raising activities concerning violence against women, with older women being one of the prime targets within the campaign.

Another project, started by the Slovenian Federation of Pensioners' organisations, is "Elderly for elderly", which targets elderly people, to improve the quality of their lives and the lives of their peers based on voluntary work. Volunteers visit older citizens in their neighbourhoods. And if during these visits volunteers become aware of cases of violence or abuse they alert the relevant centre for social services, which then takes over the case according to established practices.

A delegate from **Austria** said that despite the growing concern about abuse and violence against older women

this has not been as high on the agenda of policymakers as it should be. The delegate said that, in many ways, violence and abuse against older women is still an issue that it is hardly spoken about. There is a lack of reliable data and knowledge at both national and international levels.



He said that, with regard to Austria, a recent study has shown that among women aged between 60 and 97 years old who are living in private households, every fourth woman has experienced some form of mistreatment in the past year. Emotional abuse has been the most prevalent followed by financial abuse, very often committed by children. Sexual abuse and physical violence are the least reported, according to the Austrian study.

The delegate added that the Austrian Government regards abuse and violence as a human rights violation and tries to develop all policies within a human rights perspective. The Government has been trying to raise awareness of all forms of violence against older women with a public information campaign and have supported a theatre project and two film projects in order to improve the public image of older people. They have also engaged in research to enhance knowledge about the root causes of elder abuse. There are focal points and a telephone hotline for older women who have been victims of abuse.

A delegate from **Canada** said that the Canadian Government is absolutely committed to the issue of elder abuse. This is one of the reasons why the Canadian Government made domestic

violence, which is particularly important for the rights of older persons, the theme of the resolution on violence against women that is being negotiated at this 29th session of the Human Rights Council. The delegate invited the non-governmental partners to engage with the resolution, and encouraged State partners to both engage and co-sponsor the resolution.

A delegate from the **United States of America** said that the more we study elder abuse, the more we understand that elder abuse is a form of violence that predominantly impacts women. Global prevalence data is lacking, but we know that across the world, women comprise the majority of elder abuse victims. In the United States, two out of three elder abuse victims are women. Some reasons for the disproportionate impact of elder abuse on women include higher rates of poverty, social isolation, and dependence on a caregiver, often a spouse.

The delegate said that, in every country, older women who are abused are more likely to suffer illness and die sooner than those who are spared abuse. The negative health effects of abuse are particularly acute for older women and include higher incidences of many serious conditions, from depression and anxiety to arthritis, breast cancer and heart disease.



In addition to the incalculable cost of human suffering, increased incidence of elder abuse will create significant costs to health systems across the globe.

She said that the United States has

focused on developing practical measures to address elder abuse both at home and globally. The “US Strategy to Prevent and Respond to Gender-Based Violence” acknowledges violence against women and girls across the life cycle, including elder abuse. President Obama signed into law the Elder Justice Act in 2010, which is dedicated to the prevention, detection, treatment, intervention and prosecution of elder abuse, neglect and exploitation, while recognizing that every individual should be able to live a life free of any form of these experiences, and advocating for that cause.

Every ten years, the White House hosts a Conference on Ageing, and 2015 is one of those years. On the agenda for the first time is Elder Justice: preventing and responding to elder abuse, financial exploitation and neglect.

The delegate asked the panelists how UN entities working on gender-based violence could further integrate the issues of elder abuse and violence against older women into their existing programming.

A delegate from the **European Union** said that the situation of older persons is very high on the agenda of the European Union. More than 20 per cent of Europeans will be 65 years or older by 2025 and the European Union is aware of the challenges that entails, including the human rights dimension. She said that is why the European Union is particularly active on this issue.

In March 2015, the European Union organized a European Summit for innovation on active and healthy ageing with more than 1,400 participants who came up with concrete actions on this issue. The delegate claimed that the Madrid International Plan of Action on Ageing had not lost its actuality but there was a need for stakeholders to accelerate implementation.

The delegate asked the panelists how to increase accessibility of existing norms and standards, saying that a more

comprehensive compilation of existing standards could be useful. She also asked what concrete measures can be taken as immediate first steps at national levels to most effectively fight violence against elderly women.

A delegate from **Ecuador** said we need to keep working on bringing to light problems about the human rights of older people. It is important not only to prevent abuse but also to actively engage older women, to bring back their dignity regarding pensions, the health care system, and the rights of widows.

Professor Delphine Roulet Scwabb from Switzerland said she found very interesting the links between human rights and elder abuse, because in Switzerland links are mostly made between patient's rights and elder abuse, focusing more on institutional abuse in nursing homes and less on abuse in everyday life.



Final Comments

Rosa Kornfeld-Matte thanked the missions of Argentina and Brazil for having worked so actively on elder abuse. In order to answer the questions posed by delegates, she said that the world is ageing, with the majority of the ageing population being women, which is referred to as "the feminization of ageing". She said that we all have to work together to see what can be done, to see if laws, policies and programmes have been adopted and implemented. In fact, laws may exist but are not implemented. She said that abuse of

older people is prevalent everywhere, whether people are rich or poor. She also mentioned that we must know what is happening in the world so that we can share best practices. She highlighted the importance of responses to the questionnaire to assess the human rights implications of the implementation of the Madrid International Plan of Action on Ageing so that, for 2016, she can present her findings and make recommendations.

Silvia Perel-Levin said that governments don't enable access to information to older persons. People don't know what or where the Madrid International Plan of Action on Ageing is on a day-to-day level. She encouraged Member States to include older persons in all the other reporting mechanisms. She said that analysis had been conducted of the reporting on Beijing+20 and just a handful of Member States had reported on the state of older women, claiming that the same applies to Universal Periodic Reviews and any other human rights mechanisms.

Bridget Sleep, in response to the question about first steps that can be taken at a national level, said that there are a number of things that States can do to meet their human rights obligations in this area in terms of changing harmful social norms and providing effective protection and prevention as well. One of these is a review of legislation to see the extent to which it addresses violence in all its forms in older age.

She said, in terms of access to appropriate services, there is work to be done with existing service providers who work on supporting survivors of violence against women, to ensure that they also address and reach out to target older women in their services. She added that training of law enforcement and of the judiciary would be beneficial and public and professional campaigns could help to change attitudes and behaviours.

H.E. Regina Maria Cordeiro Dunlop

said that visibility of the abuse of older women is very important. She said that we could act at the legal level by providing a legal framework nationally

and maybe at regional levels, extending these frameworks to other levels.

She added that we could have studies from the UN system to get more visibility. She said that once the legal status is dealt with, attention can be turned to services, such as health care. Action in local communities is also important, for example, for local leaders to talk and bring this into a dialogue, into an everyday topic within communities so that women can speak about their experiences and involve the community.

In closing, **Alanna Armitage** spoke about two programmes that UNFPA is currently involved in where violence against older women and older women's health is being taken into consideration. One is a joint programme with UN WOMEN on critical services for victims and survivors of violence against women. UN WOMEN has an important

programme where neglect and abuse of older women is taken into account.

She said that the other programme that UNFPA is involved in is a framework to look at the sexual and reproductive rights of older women claiming that the status of women over 49 is a very neglected issue.



*Falling Between the Cracks: Abuse and Violence against Older Women
Marking World Elder Abuse Awareness Day – 10 years on*

The Side Event at the 29th session of the Human Rights Council at the United Nations in Geneva, was organized by the NGO Committee on Ageing and the Office of the High Commissioner for Human Rights (OHCHR), Mandate of the Independent Expert on the Enjoyment of All Human Rights by Older Persons with the following sponsors:



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