Submission to the call for inputs on violence against older persons – 2023 HRC report

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# Data sources

There is a major gap in data on experiences of violence and neglect experienced by older people in England. There are three key, national surveys which include older men and women and items on violence and abuse (among a wide range of other topics): a health survey, a crime survey, and a longitudinal study of ageing (Table 1). However, these are all drawn from the household population and so miss those living in care or residential settings, or those without language or cognitive skills to take part or who are living with a family that controls their engagement externally.

Table 1

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| --- | --- | --- | --- | --- |
| Data source  | Targeted population  | Sample size  | Data collected on violence  | Country  |
| Adult Psychiatric Morbidity Survey (APMS) (2007, 2014 and 2023) | Random sample household residents aged 16+, with no upper age limit to participation. | APMS 2014: 2,570 were aged 60 or over among a total of 7054 participants | Questions on experiences of violence and abuse based on the Crime Survey for England and Wales (CSEW), originally drawn from the Conflict Tactics Scale (CTS). The items span physical, sexual, emotional, and economic violence and abuse.  | England |
| English Longitudinal Study of Ageing (ELSA) | Random sample household residents aged 50+ every two years since 2002.  | Wave 3 (life history): 7,855 participants | Life history module in wave 3 included questions on lifetime experiences of physical violence, sexual violence, and childhood abuse from a parent. | England |
| Crime Survey for England and Wales (CSEW) | Household victimisation survey. Up until 2001 the data collection took place every two years, and since 2001 - on a yearly rolling basis. The main CSEW survey is administered to all adults aged 16 and over with no upper age limit. | A total sample size of around 30,000-40,000 per year, over one third of it are those aged 55 and over. | Detailed data on the experiences of crime (victimisation module). | England and Wales |

1. In APMS 2014: of those 60 or over, 2.0% (n=52) reported any experience of violence, abuse, bullying, or serious assault in the past 12 months. Odds of violence were significantly lower in the oldest age group (75+) than in the younger group (60-74).
2. In ELSA (life history questionnaire): among 6,555 who responded to at least one question about violence experience, 828 (12.8%) reported at least one violence type (i.e., physical, sexual, or childhood abuse).
3. Projections from CSEW 2018/19: approximately 180,000 older women aged 60-74 and 98,000 older men aged 60-74 were victims of domestic violence and abuse (DVA) in England and Wales in the past year. Most victims of domestic homicides were female (67%) and perpetrators were male (81%).

The victimisation rates for older adults are concerning despite being lower than for younger adults. Using CSEW (main questionnaire), we found that the proportion of 16 to 49-year-olds who experienced violence declined significantly between 2001/02 and 2019/20 from 5.6% to 2.4%, while the proportion of older adults experiencing violence remained broadly unchanged over the same period. This indicates that as the ageing population has been increasing, more and more older adults are experiencing violence.

 The official measure of violence is based on the data from the main face-to-face CSEW questionnaire which underestimates DVA and does not capture non-physical abuse – both of which are better captured by the data from the self-completion questionnaire within CSEW (1). Incorporating responses from these data into the ONS measure of violence from the main face-to-face questionnaire represents a more inclusive measure of violence and results in an increase in prevalence of violence, particularly among women (1). Until 2017, the self-completion module was only administered to those aged 16 to 59, therefore excluding the older population excluded respondents older than age 59 from their self-completion part until 2017. From 2017 until 2021 the upper age for the self-completion part was set at 74.

Our previous findings used both (main and self-completion) parts of the CSEW questionnaire and showed that between 2004/05 and 2018/19 the risks of experiencing violence among the oldest age group (available on a consistent basis over long time period) – 50-59 year olds - increased significantly from 2.0% to 3.3%, while it declined for the younger age groups (2).

# Places and forms of violence

* In the UK, older people are most likely to experience violence in their own homes from their intimate partner or another family member(s) (3, 4).
* The Safeguarding Adults Collection (SAC) data by NHS Digital (2022) (those aged 65 and over accounted for 96% of all the inquiries) suggest that most safeguarding incidents happened in people’s own homes. Most UK older people live in their own homes, while only about 4% of those aged 65 and over live in care homes (5). However, those who live in care homes are most vulnerable in terms of health and exposure to possible abuse.
* Our analyses of the APMS 2014 data also suggest that among people aged 60 and over, DVA was the most common: 1.5% (CI 1.1-2.1) of the participants reported DVA, with 1.3% (CI 0.9-1.9) experiencing violence and abuse from their intimate partner in the past 12 months.
* Another place where older adults are at risk of experiencing violence and abuse are care homes. According to the SAC data, nursing homes and residential homes combined were the second most common location of risk after people’s own homes.
* SAC data suggested that the most frequent type of mistreatment was neglect and acts of omission (30% of inquiries). Similar results were found in earlier research on elder abuse conducted in the UK (4).

# Intersectionality

Sample size in most of the available surveys in the UK limits analysis of intersectionality, in particular by ethnicity as composition of older UK population is largely white. Due to small numbers, different ethnic categories often had to be combined in one “ethnic minorities” group for the analysis.

**Sex:**

* Among ELSA participants, the prevalence of lifetime experience of physical attack or assault was significantly higher among men 7.4% than women (4.5 %), whereas women were more likely to have experienced sexual assault 8.4% (than men (2.8%) (6).
* Experience of physical violence predicted development of limiting illness (AOR 1.75 95% CI 1.03-2.99) in women, while these effects were not observed in men. Exposure to sexual violence was associated with the development of a psychiatric condition in later life for women (AOR 1.81, 95% CI: 1.06-3.71) but were less evident in men.

**Ethnicity:**

* APMS 2014 findings suggest that older people of non-white ethnicity experienced higher risks of violence than white participants in the past year.

**Health:**

* The APMS findings suggested that among older individuals exposed to violence in the past 12 months, 26.4% had a common mental disorder (CMD), compared with 10.2% in those not exposed to violence, after adjustment for demographic and socioeconomic factors. This relationships between health and violence can be bi-directional, i.e., those exposed to violence were more likely to develop CMD, but also those with CMD had greater risks of experiencing violence.
* Multiple disability types (more likely among older people) increased the risk of IPV for women (but not men) (7).

**Other risk factors:**

* According to the APMS results, being divorced, separated, or widowed were associated with increased odds of older people experiencing violence in the past year.
* Those who experienced childhood abuse had higher rates of violence and abuse in older age (8).
* Isolation and loneliness are associated with higher exposure to violence in people aged 60+ (CI 1.8-8.4) (5). Isolation and (in)visibility are also key risk factors for DVA among disabled women (6).

# Examples of good practices

* Monitoring – removing the upper age cap to participation in the CSEW self-completion in the upcoming wave will provide a better understanding of the extent of violence against older people in England and Wales.
* Introducing Domestic Abuse Bill 2019-2021. Although not specifically tailored to older people, the Bill aims to tackle DVA, which is most common type in older people.

The law has provided the statutory definition of domestic abuse and distinguished it from other types of violence.

* The Bill established the office for new DA Commissioner, which functions include encouraging good practice in prevention, monitoring, investigating and prosecuting DA; protecting and supporting DA survivors; raising public awareness.
* In Wales – Older People’s Commissioner has established the Stopping Abuse Action Group in April 2020. The purposes of the group include improving data collection, capturing older people’s lived experiences of violence and abuse, influencing policy ad legislation, providing training to staff who work with older people.

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