**Hannah Bows webinar 26 October 2023**

Do older people have a poorer outcome from criminal justice proceedings? During interviews with older people, it has been found that communication with them has been poorer than with younger age groups. Hannah’s work involved looking at a large sample of cases – from report to court. The police data, on which she has been focusing, shows that the most common offence is common assault and battery, which accounts for around a third of cases. This differs to what previous studies have found. We tend to think of older people being at low risk to violence, but Hannah’s research shows that this isn’t the case. We think about older people being subject to scams and fraud but police data paints a different picture. It dispels the myth that violence only happens towards people of a certain age. Domestic abuse mostly affects women but overall, there is gender symmetry with cases.

Hannah has just finished a different piece of work for the Home Office, where 66 professionals across health, justice and domestic abuse services were interviewed. Hannah talked about the rigid set of criteria that we tend to have for “the ideal victim”. We have relied on data that excludes older people; or limited data that makes big claims that older people aren’t victims of crime. She noted a quarter of crime affecting older people happens in open spaces, so not just in their own homes.

The ONS run the national crime survey for England and Wales; Hannah has used the data from this in some of her work around older adults. The methodology is robust and uses a large sample. In 2004/05, they introduced a specific module on domestic abuse and stalking – however age of victims was capped at 59. The reason for older adults being excluded was two assumptions: it was thought (a) they would get confused about what is violence from family members/partners and, (b) if over 60s probably could not use a computer to complete the survey. Hannah notes that lots of people under the age of 60 struggle to use a computer and additional support was put in place for them. In 2017 the age cap was lifted to 74. It has now been removed altogether.

Domestic abuse is chronically under-reported, and the police aren’t always the first point of contact. Hannah hasn’t found that older people are specifically having poorer outcomes however, in Northern Ireland, the picture is different. Hannah isn’t directly comparing to younger people (which Northern Ireland may be doing), she is looking at the national average.

She talks to victims as part of her research as well as to the police, prosecutors and attending court. There was very little evidence, in these conversations, to suggest that age was a specific feature relevant to the type of abuse experienced. She also looked at CPS case files, for all of those charged. There was scant mention of age; it doesn’t come up as a primary feature of the case or appear to influence any decision making. When interviewing the police/prosecutors, she found the same. The experience and type of abuse was the same regardless of the person’s age.

Around a third of cases, particularly where assault had occurred, involved a family member. In the main, the suspects were much younger than the victims. The criteria of Hannah’s study are that the victims are aged 60+. The average age of the suspect was 34, and male – perhaps an adult son or grandson. She reflected that professionals will probably be looking at abuse from a partner, not from adult children. From a safeguarding perspective it is about whether those cases are adequately risk assessed and managed. There is no specific data on whether the perpetrators are unpaid carers (that was not the focus of Hannah’s study here).

However another study that Hannah has carried out shows that a proportion of people who are perpetrators do have a carer role, often featuring as a means of control. There is a presumption that frailty and vulnerability are an inevitable part of aging, so the perpetrator positions themselves as “supporting” their elderly father or mother, something seen as not only acceptable but welcome in society. In the safeguarding (section 42) cases she reviewed, she found that the perpetrators control the finance, get the medication, and do all of these things because they say they care. But the enquiries found that it is not about care, it is about control.

A participant in the webinar commented that the perpetrators often have their own issues with mental health, or addiction. Hannah said that she found in at least half the safeguarding cases an adult child was the perpetrator. They did often have housing issues and/or drug/alcohol dependency.

As with the ideal victim concept, there is also the ideal offender. We have a vision of a domestic abuse victim as a young female in a heterosexual relationship with a larger male as abuser. If that image criteria isn’t met then the victim can be blamed or not believed; that’s the same with older people, Hannah found. A lot of energy can go into meeting the needs of the perpetrators, as carers, focusing on them and potentially not the victim. Hannah gave an example of a son who is controlling the finances for an older woman. It is likely that the woman’s husband used to control the finances and if the husband is no longer around then the control is taken over by the son. The woman doesn’t want the responsibility of looking after the finances as they’ve never had to. It is easy to miss this as it’s not talked about; the victim doesn’t see it as abuse, even when they can’t access money for the things they need, or money is being taken from the account without permission.

DASH risk assessments: there has been a lot more evidence in the past few years that they are not inclusive. Older abuse is ill defined. In the USA, it appears in a lot of policies. It is separated and distinguished due to age. But DASH is based on a child abuse model from the 1970s and 1980s. By separating out abuse of older adults, it is suggesting that something different is happening to them, but evidence is showing that there is no difference. Domestic abuse is domestic abuse, whichever age. The risk as such does not increase as you age. Abuse from a younger family member can also happen to people in their 40s and 50s. It is ageist to say that it is different for anybody over 60. Hannah said that it is a social issue that affects us across the life course. With risk assessments, she suggests that we go back to basics and ask, across the life course, is this suitable tool for you? If not, why not? When the tools were designed, older people weren’t in mind. We could have a separate tool but then we’re asking people to look at it as though it is a separate issue. Hannah believes that the framework is wrong; everything needs to be revised, not just the tweaking of a few questions. DASH has worked very well for what we needed it to do but it’s time for a re-think now to accurately reflect the risk for everyone.

As mentioned above, the crime survey increased the age cap to 74 and then removed it altogether for the domestic abuse data. Now we have that data on domestic abuse and stalking. Hannah said that they have been looking at the first three consecutive years needed to make an accurate assessment of the data. They’ve looked at what domestic abuse against older adults looks like compared to the generations below. There is no statistically significant difference in risk factors, showing that domestic abuse looks the same for older adults as it does for younger adults. This evidence supports a revised DASH tool. Can we create a flexible tool that works for everyone and sees it as a life course problem instead of grouping people into categories? Testing needs to be done and that would be a starting point. If that cannot be done then something needs to be created for different groups but, Hannah says, if you put people into groups, you stop seeing the links.

Dementia and domestic abuse: when the perpetrator has dementia, it is seen as a shield. It’s a distraction much of the time from the domestic abuse. Dementia affects 10% of the population aged over 85. If you have dementia and you’re violent and the only reason that you’re violent is due to the dementia, that’s not domestic abuse and that label shouldn’t be used. If you’re disclosing domestic abuse and you have dementia, then the abuse is unlikely to have started because of the dementia diagnosis. The abuse is almost always long standing, and the dementia should be disregarded.

Links shared by Hannah:

[Perpetrators-of-DA-report-v.5.pdf (durham.ac.uk)](https://www.durham.ac.uk/media/durham-university/research-/research-centres/research-into-violence-and-abuse-centre-for/pdf-files/Perpetrators-of-DA-report-v.5.pdf)

[Practitioner Understandings of Older Victims of Abuse and Their Perpetrators: Not Ideal Enough? | The British Journal of Criminology | Oxford Academic (oup.com)](https://academic.oup.com/bjc/advance-article/doi/10.1093/bjc/azad057/7289076?searchresult=1)

[Domestic Homicide of Older People (2010–15): A comparative analysis of intimate-partner homicide and parricide cases in the UK (worktribe.com)](https://durham-repository.worktribe.com/output/1344021/)

[Practitioner views on the impacts, challenges, and barriers in supporting older survivors of sexual violence (worktribe.com)](https://durham-repository.worktribe.com/output/1352529/)

[Rape of Older People In The United Kingdom: Challenging The ‘Real Rape’ Stereotype (worktribe.com)](https://durham-repository.worktribe.com/output/1398554/)