SKILLS MODULES 5 OF 7 MODULE 5 Particular Groups

BEFORE WE BEGIN

REFLECTION

Before we begin this module take a moment to think about this statement from **Zannettino** (2015):

The literature suggests that culturally and linguistically diverse (CaLD) older people are particularly vulnerable to financial abuse and exploitation due to their dependency on others for translation, financial transactions, and services (Wainer, Owada, Lowndes, & Darzins, 2011). Walsh, Olson, Ploeg, Lohfeld, and MacMillan (2011) suggest that although distinct forms of oppression experienced by people due to age, gender, disability, race and culture, sexual orientation, and poverty can increase an older person's vulnerability to abuse, the literature does not provide a clear understanding of how oppression shapes the experience of abuse among older people who are marginalized.

Advisers need to approach vulnerable older persons in a way that is sensitive to their lived experience, including any specific vulnerability to financial abuse.

OVERVIEW

PARTICULAR GROUPS

Working with particularly vulnerable groups of older persons is complex because it calls on advisers to have an understanding of the diversity of experiences of older persons and the diversity of experiences of elder abuse.

Advisers need the skill to identify and implement appropriate and adapted approaches for particular groups of vulnerable older persons such as older Aboriginal and Torres Strait Islander persons, older persons from cultural and linguistically diverse backgrounds, GLBTIQ+ older persons, older members of faith communities and older care leavers.

Advisers can draw on elements of a meaning centered approach, traumainformed practice and an applied ecological approach to meet the needs of a diversity of older persons.

LEARNING OUTCOMES

include gaining skills to identify how financial abuse presents and affects diverse communities and particular groups, so when faced with individuals they can draw on specific skills.

USING A MEANING CENTRED APPROACH

Advisers can use a 'meaning centred approach' when working with vulnerable older persons. A meaning centered approach incorporates the following characteristics:



THE ADVISER IS INQUISITIVE

engage with the older person as 'humble knower', curious about the their worldview, meanings and lived experience



THE ADVISER IS COLLABORATIVE

engage with older person in a reciprocal process of sharing knowledge and exploring meaning



THE ADVISER IS RESPECTFUL

honour diverse ways of knowing and being; creates space for voice, wisdom and experience of the older person to emerge, be heard, be valued and understood.



THE ADVISER IS CRITICAL

engage in critical self-reflection
—cultivating an awareness
of how social and cultural
identity and experience shape
knowledge, awareness and
interactions. (NICE)

Meaning centered practice emphasises a need to better understand elder abuse, including financial abuse within a particular context (such as Aboriginal and Torres Strait Islander persons) and also provide meaningful services (McMillan, 2010).

TRAUMA-INFORMED PRACTICE

Trauma-Informed Practice is a strengths-based framework grounded in an understanding of and responsiveness to the impact of trauma, that emphasises physical, psychological, and emotional safety for everyone, and that creates opportunities for survivors to rebuild a sense of control and empowerment (Hopper et al., 2010).

Becoming trauma-informed is about supporting people to feel safe enough in their interactions with services. To build trust, and help people overcome their fear and sense of betrayal.

Becoming trauma-informed is not an end state, but a process. It requires a step-wise implementation and review over time. (Blueknot Foundation)

Trauma often
affects the way people
approach potentially
helpful relationships (Fallot
and Harris, 2001). This is
because many survivors
feel unsafe.

Many lack trust or live in fear.

TRAUMA-INFORMED PRACTICE

The journey to becoming a trauma-informed service has been conceptualised into 4 stages (Miesler and Myers, 2013):

1

TRAUMA AWARE

Staff understand trauma, its effects and survivor adaptations.

3

TRAUMA RESPONSIVE

Individuals and the organisation recognise and respond to trauma enabling changes in behaviour and strengthening resilience and protective factors.

2

TRAUMA SENSITIVE

The workplace can operationalise some concepts of a trauma-informed approach.

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TRAUMA-INFORMED

The culture of the whole system, including all work practices and settings reflects a traumainformed approach. (Blueknot Foundation)

Excellent resources exist for having conversations about trauma. Advisers should consider undertaking specific Trauma-Informed Practice training.

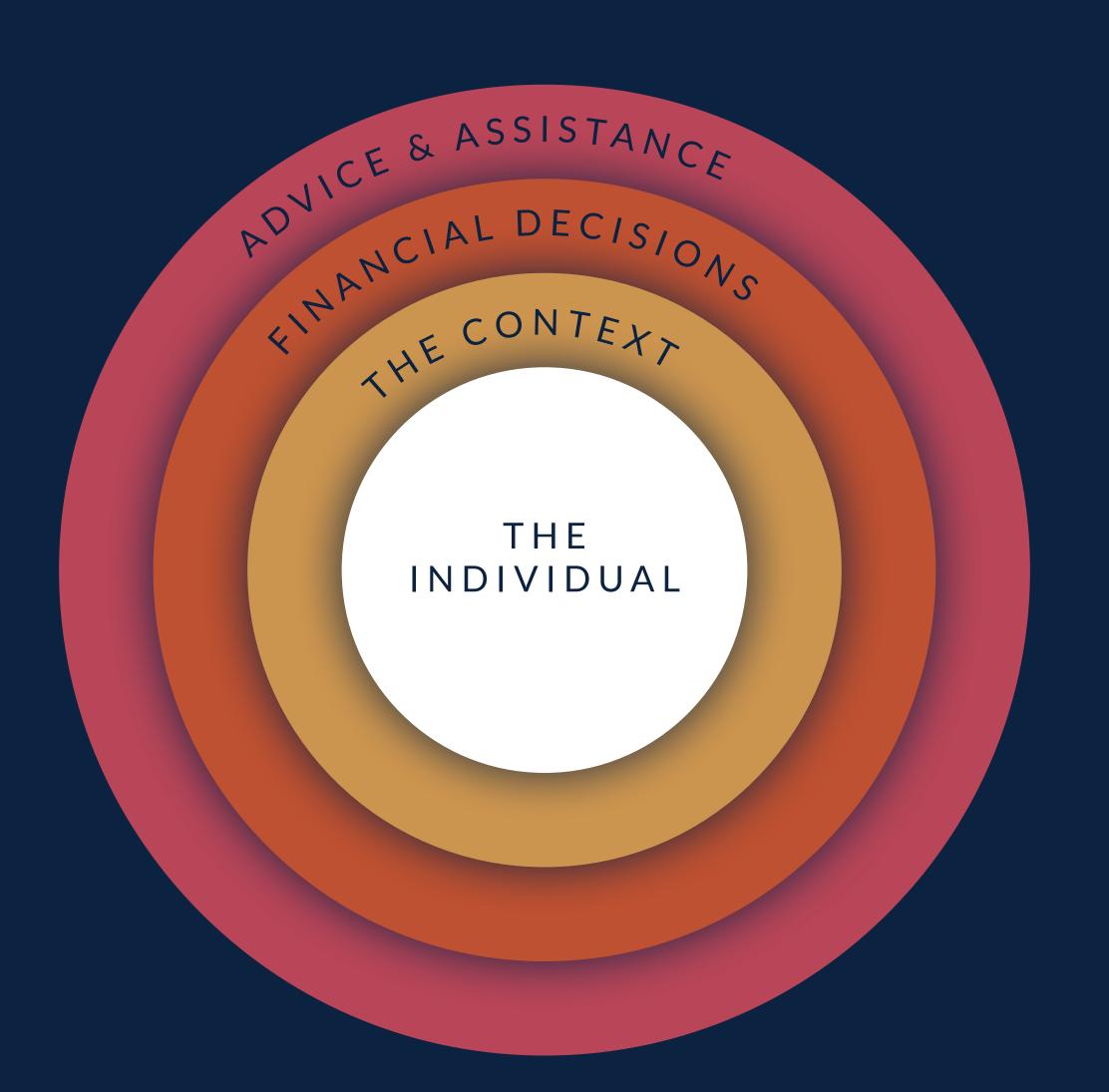
USING AN APPLIED ECOLOGICAL APPROACH

Advisers can consolidate the various complexities of dealing with vulnerable older persons (such as conceptions and meaning) through an **applied ecological approach**, which:

- Considers the risk factors of the individual, the perpetrator, their mutual relationship, and their respective positions within community and society and
- Allows for the specificities of different frameworks such as caregiving, family violence, ageism, and dependency, while also taking into consideration gender and sexuality, and culture (<u>Joosten</u>, <u>2017</u>)
- Reminds us that individual interventions like the Financial Protections Service, where we ask older people to change their behaviour, such as taking steps to protect their financial future and recognising financial abuse, must not place all responsibility on individual Service Users

Therefore, life transitions such as retirement must be placed in their larger context, including the motivation for retirement, life circumstances and the interdependent nature of decision making around retirement given that 'individuals frequently base their decision to retire on changes in others' health or retirement plans, and the retirement experience is played out in a network of shifting social relations (Kim, 2001).

USING AN APPLIED ECOLOGICAL APPROACH



Advisers working with Aboriginal and Torres Strait Islander communities should pay careful attention to their particular needs. The NSW Elder Abuse Tool Kit Tool 3.6 suggests some strategies for communicating effectively with Aboriginal and Torres Strait Islander persons (EAHRU, 2016).

Importantly, advisers need to understand that Aboriginal and Torres Strait Islander persons can be considered older at 50 and become eligible for aged care entry from that age. This reflects the significant gap in life expectancy for Aboriginal and Torres Strait Islander persons.

Additionally, in the context of Aboriginal culture, the term 'older people,' 'elder' and 'Elder' are used. 'Elders', with a capital 'E', are recognised community representatives and custodians of culture, history, the Dreaming and storylines. Elder abuse does not necessarily imply abuse of cultural Elder, even if that phenomenon may occur.

Advisers must understand the range of risk factors that potentially impact on older Aboriginal and Torres Strait Islander persons.

These factors can also be viewed from an Applied Ecological Approach and fit within the various systems used by that approach. For example, many of the impacts are at community and societal levels.

RISK FACTORS FOR ELDER ABUSE FOR OLDER ABORIGINAL AND TORRES STRAIT ISLANDER PERSONS

SA Health Sourced and adapted from Tasmania, Responding to Elder Abuse 2012

HISTORICAL & CULTURAL

- Disposition of land and cultural dislocation
- Intergenerational grief & trauma
- Dislocation of families through child removal policies
- Impact of institutionalisation
- Imposed shame
- Impact on healthy functioning of community kinship systems
- Changes in gender roles

HEALTH & SOCIAL & EMOTIONAL WELLBEING

- Low self-esteem and a sense of powerlessness
- Marginalisation as a minority
- Societal attitudes and stereotyping
- Individual, direct, indirect and institutional racism
- Destructive coping behaviours
- Poor health outcomes
- Lateral violence

SOCIO-ECONOMIC

- Economic exclusion
- Unemployment and welfare dependancy
- Income management
- Entrenched poverty
- Multiple caring roles for younger generations

Other important issues identified that can be viewed within meaning centered and applied ecology approaches include:

- Elder abuse takes different forms across Aboriginal and Torres Strait Islander communities. Living in a discrete rural community means many people know each other's business. This includes family and community tensions which exist in the everyday life of that community. Tensions can exist for years or can be transient.
- Tensions can shift from individual to individual, family to family. This can make the help seeking process more challenging for the older person living in an abusive situation. Knowing what these tensions are is important if the community is to be engaged as part of the solution to ending elder abuse.
- Elder abuse raises **fear and concerns** of being judged as an inadequate parent or grandparent by others. For older persons living in remote and rural locations, abuse may be more difficult to address. The older person may not want the community to know their family business and shame about the abuse may keep the abuse hidden or prevent it from being addressed.

- **Family obligation** in Aboriginal and Torres Strait Islander cultures is very important and may have both positive and negative effects on the outcome of an intervention taking place. Family obligation can positively help families to work together to keep the individual safe. On the other hand, loyalty towards family and fear of loss of family may be a barrier to help seeking behaviour of individuals and families, even when abuse is occurring. If the older person being abused has a strong family network or is respected in the community, other community members may feel compelled to speak up and step in.
- People of Aboriginal and Torres Strait Islander background accustomed to living in **rural or remote communities**, may feel more **isolated** and challenged in seeking help when living in metropolitan environments. Lack of family support and community connection living in metropolitan regions means abuse can go unnoticed and people may be unaware of how or where to access services.

Adapted from **SA Health**

Conversations and messaging around elder abuse from <u>Australian services</u> has included describing elder abuse as:

- Bashing an Elder
- Ripping them off by taking their food
- Ripping them off for their money
- Ripping them off for their medication
- Ripping them off for their possessions
- Threatening Elders with violence
- Sponging off Elders
- Threatening Elders that they will not see their grandkids
- Cutting Elders off from their community support and
- Starving Elders of food, money and every day needs
- Taking Elder's pensions

A useful resource is
the Domiciliary Care
Ngadluku Purkana Tirraapinthi Protecting Our
Elder Service Provider
Handbook (SA Department
for Communities and Social
Inclusion, 2013).

WORKING WITH CULTURAL VALUES

Advisers working with older persons from CaLD backgrounds must appreciate that some **cultures** experience financial abuse **differently**. For example, in Korea, older people defined financial abuse as not providing older persons with financial support; very few thought it was adult children exploiting parents (Lee, 2013). Neglectful behaviours were seen to be the most disrespectful.

A key feeling of abusers across cultures is the **sense of entitlement** to the older person's money, usually by family members, who feel they will inherit it anyway, and the older person no longer needs it (or as much), or they feel they 'deserve more' for 'services rendered.' (Davidson, 2015).

The prevalence of financial abuse is said to differ in Asian countries: China (13.6%) (Dong. 2007) and Japan (35.7%) (Anme, 2004). (Both cited in Yi. 2015) Commentators have suggested that Asian elders may have a higher tolerance for abusive acts and Asian traditional beliefs call for disposing of worldly good in preparation for reincarnation. (Yan, 2015)

CULTURALLY AND LINGUISTICALLY DIVERSE COMMUNITIES

Blundell and Clare (2012) worked on developing best practice for dealing with elder abuse in culturally and linguistically diverse communities. They noted findings that families from CALD backgrounds face different issues from those from English-speaking backgrounds.

For example, in many ethnic families there are **differing intergenerational attitudes** about how the older generation should be cared for. This
may be due to the older generation holding on to cultural beliefs
from their countries of origin, while the younger generation
has often begun to accept values and beliefs more like
edue
those of the host society (**Blundell, 2012**).

Cultural values mean that definitions scripted by scholars, service providers, educators and policy makers **may not resonate** with older persons from CaLD backgrounds (Lee, 2012).

A lack of attention to culture in the existing definition of financial abuse is a significant limitation (Lee, 2012). Older persons from different cultural backgrounds define, perceive and respond to financial abuse in distinct ways (Chang, 1997, Lee, 2009).

CULTURALLY AND LINGUISTICALLY DIVERSE COMMUNITIES

Research on financial abuse in CALD communities found:

- Older non-English speaking Australians are not only at risk of being financially abused by their family members but may also deny it will ever happen to them. (Wainer, 2011) There is a **preference** among CALD older people to sort through issues within the family and a reluctance to speak out about problems. (Wainer, 2011)
- CALD older people may fear **exclusion and abandonment** from their family, who may be the sole providers of support, or loss of face in their community for reporting a family member to authorities, shaming the entire family in the eyes of the community, or being blamed and held accountable for an adult child's behaviour (OPA 2006; Wainer, 2011).
- For those CALD older people who feel that some kind of abuse is occurring, seeking outside help may not be seen as an option, as many CALD older people lack confidence in government institutions and police due to previous negative experiences in their country of origin (OPA, 2006; Wainer, 2011).

OLDER LGBTIQ+ PERSONS

Older LGBTIQ+ persons face the typical challenges of ageing, including the possibility of elder abuse or domestic violence, in combination with the threat of **discrimination and abuse** due to their sexual orientation or gender identity (**Cook-Daniels**, 1998).

Advisers must take into account that:

- Older LGBTIQ+ persons are at high risk for elder abuse, neglect and exploitation, including through social isolation
- Fear of homophobia or transphobia keep older LGBTIQ+ persons from seeking help and services
- Internalised homophobia or transphobia may affect an older LGBTIQ+ person's willingness to seek help and put them at risk of self-neglect
- Some older LGBTIQ+ persons choose to hide their LGBTIQ+ identity and disclosure of that identity against their wishes can cause problems.

Advisers need to
be aware of the issues
facing older LGBTIQ+
persons. Elder abuse of
LGBTIQ+ older persons is a
hidden problem within
a hidden problem

(Gutman, 2017).

OLDER LGBTIQ+ PERSONS

- Older LGBTIQ+ persons place high value on self-sufficiency and may be reluctant to accept help.
- The need to be sensitive to an older LGBTIQ+ person's lack of legal protections, desires, relationships, and potential need to be connected to the LGBTIQ+ community (NCEA).

Cook (1998) suggested some issues for working with the LGBTIQ+ community around the issue of elder abuse:

- Be aware of the lack of legal protections for older LGBTIQ+ persons and the potential impact.
- It is imperative that all who interface with the older LGBTIQ+ persons use the name and pronoun (e.g. he, she) used by the older persons, regardless of legal or biological identification.

OLDER LGBTIQ+ PERSONS

- Connect and build rapport with the older LGBTIQ+ person by asking about their career/profession, friends, and personal effects
- Listen especially carefully to the older LGBTIQ+ person's input and desires
- Be aware that not all couple relationships are heterosexual. Use the same terminology used by the older person (e.g. partner, roommate, friend) when referring to the other member of the couple. Ask the older person if the partner/ roommate/friend can be counted on to provide care or financial assistance to them. Keep in mind that a large age gap between partners in a gay couple doesn't imply an exploitative relationship
- Be prepared to be able to connect the older person to community resources for older LGBTIQ+ persons should they so desire (e.g. if they want to talk about being gay, lesbian, or transgendered)
- older LGBTIQ+ persons may have close networks of friends that may serve as a protective factor.

INDUSTRY EXAMPLE

LGBTIQ+

Think about this statement from <u>National Lesbian</u>, <u>Gay</u>, <u>Bisexual</u>, <u>Transgender and Intersex</u> (<u>LGBTI</u>) <u>Ageing and Aged Care Strategy</u>

The LGBTI population is not a homogenous group, although there may be similarities between groups in relation to sexual orientation, sex or gender identity. Nor are these groups mutually exclusive; for example, someone may be transgender and a lesbian. Groups within LGBTI communities have specific social, cultural, psychological, medical and care needs. For example, transgender people have different needs than gay men. However, they share the experience of being part of a minority population likely to have been subjected to exclusion, discrimination and stigma throughout most of their lives.

The strategy recognises:

- There have been decades of inequitable treatment for LGBTI people
- Many LGBTI people have suffered stigma, family rejection and social isolation and
- Many LGBTI people have had a life experience of fear of rejection and persecution, coupled with the impact of potential or actual discrimination.

OLDER MEMBERS OF FAITH COMMUNITIES

Advisers may encounter financial abuse that involves members of faith communities, including where older persons and persons of influence and abusers are co-members, co-parishioners and co-worshippers.

Additionally, at times the trusting relationship between faithful older persons and their faith leaders may make disclosure of financial abuse more likely. Referrals to faith-based services or pastoral care can be both sensitive and expedient.

Perhaps more than any other single resource, faith leaders are in the special position of being able to offer spiritual and emotional help and guidance to victims (<u>Podnieks</u>, <u>2003</u>).

An older person may be less likely to fabricate a situation to a trusted member of the clergy (Pagelow, 1988).

CARE LEAVERS

Advisers must be aware of 'Care Leavers' who are older persons who spent time in care as a child (under the age of 18). This care could have been foster care, residential care (mainly children's homes) or another arrangement outside their immediate or extended family. The care could have been provided directly by the state through a court order or voluntarily, or by the private sector.

More than half a million children were placed in institutional and out-of-home care under various arrangements. Care Leavers may also be known by titles that describe particular cultural cohorts or institutional experiences such as 'Forgotten Australians', 'Former Child Migrants' or 'Stolen Generations'.

Aged care has been identified as an area of particular anxiety for Care Leavers given their previous experiences in institutional care. The Australian Government has developed the Caring for Forgotten Australians, Former Child Migrants and Stolen Generations Information Package for aged care providers to help them understand and support Care Leavers.

CARE LEAVERS

Care leavers are a good example of older persons who have experienced polyvictimisation and hybrid abuse.

Care leavers may be reticent to report any type of elder abuse. Care leavers may fear authority figures and be reluctant to seek health and support services and to report abuse due to past trauma and abuse in care.

BEFORE WE LEAVE

REFLECTION

Think about this statement from <u>Caring for Forgotten Australians</u>, <u>Former Child Migrants and Stolen</u> <u>Generations</u>:

Many of those who spent time in institutions or out-of-home care as children were deprived of love and a sense of belonging. Most were denied family support and contact and experienced separation, loss and abandonment. They were often taken from their families without permission. They were often lonely, beaten, abused and exploited, and subjected to punishment, rigid rules, humiliation, and physical, emotional and sexual abuse.

Many were denied an adequate education, and were forced to work virtually as the slaves of those entrusted with their care. Many lost their culture, or were taught to fear and hate their own cultural heritage. They often became ashamed and angry, and suffered low self-esteem. They may have retained these feelings throughout their lives. Many people from these groups find traumatic childhood memories and fears returning when they think about their aged care needs. Those anxieties may spring from childhood experiences when they were harmed by those who had been entrusted with their care. Some find the prospect of aged care delivered outside familiar places as truly frightening.