

Making Connections

Building Networks to Prevent Abuse of Older Adults

Phase 1 Research Report

Lutra Associates Ltd.

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Highlights

The Project

For over fifteen years, the NWT Seniors' Society has been working to prevent abuse of older adults. Still, there remains a lack of awareness, reporting, and policies. The Making Connections Building Networks to Prevent Abuse of Older Adults Project (Building Networks Project) is the Society's latest effort to prevent abuse of older adults. The Project is a partnership with the Canadian Network on the Prevention of Elder Abuse (CNPEA), seniors' societies in Fort Smith, Hay River, and Yellowknife, Human Resources and Skills Development Canada - New Horizons for Seniors Program, and the GNWT Health and Social Services. The Project is guided by a Steering Committee made up of 10 organizations – Canadian Mental Health Association/NWT Division, Dene Nation, Inuvialuit Regional Corporation, Government of the NWT, Health and Social Services, North Slave Metis Alliance, Native Women's Association of the NWT/Yellowknife Victims Services, NWT Seniors' Society, Public Health Agency of Canada, RCMP, and YWCA Yellowknife.

The Building Networks Project has three phases:

- Phase 1: Community Research and Literature Review,
- Phase 2: A Territory-Wide Symposium, and
- Phase 3: Network Building.

This report presents Phase 1 research findings.

Phase 1 Findings

Information was collected in 11 NWT communities ¹ on the extent and awareness of abuse of older adults, responses and interventions, and thoughts on networks to prevent and respond to abuse of older adults. Findings are based on questionnaires completed by 528 adults 50 years of age and older and interviews with 98 service

¹ Behchoko, Fort Good Hope, Fort McPherson, Fort Resolution, Fort Simpson, Fort Smith, Hay River, Katlodeeche, Inuvik, Tuktoyaktuk, and Yellowknife including Ndilo and Dettah.

providers and policy makers. Community research was supported by a literature review of best practices.

Extent and Awareness of Abuse of Older Adults

An estimated 4% to 10% of older adults in Canada experience some type of abuse.² Almost no data are available on the incidence in the NWT.³

The majority (71%) of older adults surveyed said that abuse of older adults is a problem in their community. A noticeable portion (28%) did not know if it is a problem. All forms of abuse exist but the most common forms are financial (77%), neglect (68%), emotional (63%), and verbal abuse (54%). There is a high level of uncertainty and silence about abuse. For example, older adults surveyed said that most elders/seniors in their community:

- know they have the right to live without abuse (40%) but 37% are not sure that elders/seniors understand this basic right.
- don't know how to protect themselves from abuse (47%) and 35% are not sure if elders/seniors have this knowledge or ability.
- aren't sure (38%) or don't know (36%) where to go for help if they need it.
- don't speak out about abuse (52%) and 29% are not sure if elders/seniors speak out.
- want to work with others to stop abuse (39%) but 48% are unsure if this is the case.
- know that abuse is a crime (31%) but 41% say that they are unsure whether elders/seniors know this.

Service providers and policy makers in the NWT said that evidence about abuse of older adults is anecdotal. Very few incidents of abuse are reported and data are not

² Elder Abuse in Canada: Preliminary Overview of the Issue. National Seniors Council. (unpublished). August 2007.

³ Shelters keep records of all clients as do victims' services; the RCMP maintains information on crimes. No one keeps records specifically on the abuse of older adults.

consistently maintained or reported. Service providers admitted that abuse likely "happens more than we realize."

Older adults don't report abuse for many complex and often highly emotional reasons including: shame and guilt; denial or lack of recognition for abusive behaviours/patterns; and fear of authority, reprisal, hurting family members, or losing independence. Lack of knowledge of who can help and lack of confidence that anyone will or can help also discourage reporting.

Service providers and policy makers agreed that several inter-related factors contribute to abuse of older adults including: silence/people not speaking out about abuse; addictions; and poverty including lack of affordable housing. Other factors include unemployment, weak family relationships, intergenerational conflict, acceptance of abuse, isolation and exclusion, ageism, and inadequate or inappropriate intervention services. Systemic factors such as lack of policy guidance on adult protection, closure of community-based care facilities that keep older adults safe, and lack of 'on-the ground' support for elders/seniors also contribute to abuse.

Interventions

In the NWT, abuse of older adults is addressed under the broad umbrella of family violence. The appropriateness of continuing to address abuse of older adults within this broad framework is contentious. Some service providers and policy makers contended that it gets lost among family violence initiatives and should to be treated as a standalone issue. Others suggested that it is not a problem of framework but of priority. They said that abuse of older adults should be more clearly defined, responsibilities for responding to and preventing it should be made clear, and resources dedicated to addressing it. Whether within or outside the family violence frame, service providers and policy makers agreed that distinct and separate approaches are required to respond to the unique needs and circumstances of elders/seniors, including the needs of older men who experience abuse.

In the last decade, the Coalition Against Family Violence (CAFV) has led work to respond to and prevent family violence. Within the GNWT, the Departments of Justice, Health and Social Services, and the Executive lead family violence work using a social response lens to respond to individuals who report family violence. Victims who receive positive social responses are more likely to seek help in a timely manner, and benefit from social and protective services and resources.

Services to respond to abuse of older adults are decidedly fewer in small communities than in larger centres. Services may include:

- community social service staff who focus primarily on child protection and interventions with families with children.
- community wellness, healing or mental health services for addictions, trauma, and other mental health needs.
- community health staff who provide basic medical treatment and prevention, public health, health promotion, and homecare services.
- community justice committees who provide alternatives to the courts.
- victim services workers (mainly in regional centres) who help victims in court proceedings and to prepare victim impact statements.
- community police (RCMP) who provide education, law enforcement, and protection services.
- seniors' housing, maintenance, and tenant relations staff.
- community groups/individuals who provide informal or project specific family and individual supports.

The main response of front-line service agencies participating in this research is to refer an older adult identifying abuse to another agency, most likely the RCMP or a health professional. There are no adult protection policies per se or specific legislation in the NWT.

The RCMP responds to all reports of abuse from victims, third parties and/or anonymous reports. Complaints are investigated and charges may be laid under the Criminal Code. To press charges, a victim or witness statement is usually required. If evidence is collected and charges are laid, the offender may go through the courts or be

diverted through the local justice committee. RCMP representatives report few incidents of abuse of older adults being pursued through the legal system.

Overall, legal or medical remedies were described as "overtaxed, punitive or confrontational" and undesirable to older adults because they may result in lengthy court challenges, elders/seniors being brought into care, and/or loss of independence (e.g., giving over their affairs to the Public Trustee/Guardian or an individual with power of attorney). Service providers and older adults agreed that elders/seniors shouldn't have to give up their rights and freedoms to be safe from abuse.

With the exception of agencies/front-line workers with responsibilities for the day to day care of elders/seniors, service providers in the NWT have unclear or limited authority to respond to abuse. As an example, homecare workers are the main players in the lives of elders/seniors vulnerable to abuse but they lack any clear policy guidance to respond to abuse beyond referral. When they encounter or suspect abuse they tend to recommend a referral for respite. If an older adult complains about abuse, the worker must advise the individual that a response may mean disclosing information to other front-line workers. Service providers and policy makers said that often this results in the older adult asking the worker not to say anything to anyone.

In several communities, service providers and volunteers may talk to suspected abusers and/or victims within their professional capacity or on their personal time. They take these actions even though they pose risks to themselves, their jobs, and their relationships with others.

Some front-line staff said that they are extremely frustrated that elders/seniors will not speak out or press charges against those causing them harm or damaging their property. Frustration both with the lack of ability to provide appropriate interventions and with elders/not speaking out contributes to 'victim blaming'.

Best/Promising Practices and Lessons Learned

Three recent documents are good sources of best practices for responding to and preventing abuse of older adults.⁴ Some common best practices identified in 2005, 2007 and 2009 documents were:

- comprehensive strategies and networks at all levels (e.g. raising community awareness, empowering elders/seniors to develop support groups and peer networks, and relationships among community services).
- territory/province-wide strategies that provide dedicated and sustained funding.
- particularly in First Nation and Inuit communities, culturally appropriate response and prevention strategies that are supported with implementation tools, guidelines, and programs that use family and culture-based approaches, contribute to community capacity, and use community knowledge.
- following principles that promote balanced and equitable relationships, are visible, and can be reviewed when assessing activities.
- educating professionals and training front-line workers to recognize abuse, the dynamics of abuse, and procedures when abuse is suspected or detected.
- networks of practitioners (e.g. professionals, police, researchers, front-line health and social service workers) to improve coordination, profile, research, and planning. Examples are the International (INPEA) and Canadian Networks for the Prevention of Elder (CNPEA).
- coordinated community responses to increase capacity and enable professionals to work together (e.g. interdisciplinary teams, interagency coordination, and whole community coordination).

(http://www.cnpea.ca/recent_canadian_research.htm)

Outlook 2007: Promising Approaches in the Prevention of Abuse and Neglect of Older Adults in Community Settings in Canada (2007). (http://www.cnpea.ca/Promising%20Approaches%20Final%20%202007.pdf) Promising Approaches for Addressing/ Preventing Abuse of Older Adults in First Nations Communities: A Critical Analysis and Environmental Scan of Tools and Approaches (2009).

(http://www.bccrns.ca/projects/docs/promising approaches addressing preventing abuse.pdf)

 $^{^{\}rm 4}$ Best Practices for Stopping Abuse of Older Adults in the NWT (2005).

- trusting practitioner-older adult relationships. Relationship building takes time but is essential especially in complex cases.
- dedicated services including abuse workers and centres.
- annual promotion of World Elder Abuse Awareness Day.
- carefully crafted education and awareness social marketing campaigns to eliminate discrimination on the basis of age, and facilitate the engagement of multi-cultural communities and Aboriginal language speakers.
- programming that is sensitive, makes sense, and is accessible to elders/seniors.
- peer programs that are sensitive in approach, inclusive, and engaging.
- dedicating a community development position to support partnerships, 'whole' community approaches, and stronger relationships among professionals.

Best practices research also describes individual, family, community, and society-wide interventions.

- Individual: counselling techniques that offer Western and traditional therapies and use language that avoids blaming and restores dignity.
- Family: interventions such as family conferencing that involve a multidisciplinary team, focus on the 'whole family' including the abuser, and are intergenerational.
- Community: interventions such as interagency protocols, agency networks, agency-elder/senior networks, use of existing elders programs, family violence programs, and community justice circles, involving local leadership, and training front-line workers.
- Societal: interventions such as policies or legislation, well funded and sustained strategies, and broadly based information campaigns.

To deal with abuse, older adults surveyed said that actions that would work best are:

- awareness (78%),
- speaking out (76%),
- support groups/buddy systems (71%), and
- help from social/homecare workers (71%),

Consistent with those actions that would work best to deal with abuse, older adults identified several factors that would help communities to deal with this issue:

- education and awareness about abuse (82%),
- more people speaking out (81%), and
- support from leaders (80%).

Service providers and policy makers agreed that the RCMP and the courts are not the solution for responding to and preventing abuse of older adults. They agreed with older adults that more people speaking out, more awareness and more elder/senior involvement are needed. They also suggested:

- regular or daily elders/seniors social activities like the Inuvik Elders' Day Program.
- buddy systems where elders/seniors team up with peers or a younger community member for support.
- intensive, sustained and relevant information and awareness campaigns.
- outreach/home visits and one-on-one dialogue.
- continuity among, and commitment of, front-line workers to keeping elders/seniors safe.
- active, inclusive and responsive elders/seniors groups/committees that are supported by staff.
- broadly based, regular elder/senior involvement in key community groups such as local justice committees.
- elder and youth activities on the land and in the community.
- grass-roots, community owned activities rather than those run by service providers.
- ongoing (rather than one-time only) family meetings/conferences/interventions.
- sustaining activities and workshops that take place during seniors' week, family violence awareness week, and addictions awareness week.
- focused interagency approaches.
- residential school healing activities that educate and promote healing.

• good resources/facilities that do community programming and offer short-term respite (like the Inuvik long-term care facility).

Most service providers and policy makers agreed that there is no 'quick fix' to abuse of older adults but immediate responses and longer term solutions are needed. Many suggested confronting abuse 'head on' through legislation, significant policy change, or guidelines to support front-line workers to help prevent and better respond to abuse of older adults. Some admitted that adult protection legislation may not be the best route but "like child protection, it would at least get seniors into a safe place." Some said that the work to stop violence against women should be replicated to address abuse of older adults.

Service providers and policy makers agreed that the main ingredients of successful responses to the abuse of older adults are: trusting, respectful worker-elder/senior relationships; naming/identifying abuse; positive intergenerational relationships; consistent and regular positive responses; community-based cultural and language appropriate services; and proactive, visible and cohesive services and front-line workers.

Thoughts on Networks to Prevent and Respond to Abuse of Older Adults

Older adults, service providers and policy makers participating in this research agreed that everyone needs to work together to prevent and respond to abuse of older adults. Older adults said that the best way to get people/groups in their community working together is to do home visits (78%), have training workshops (74%), and form an elders/seniors group (73%). Service providers and policy makers agreed that inclusive, representative and well supported elders/seniors groups can be an effective way for people to work together. Other suggestions for ways people could network and work together to prevent and respond to abuse, included:

- family based, family building networks.
- peer support groups that are facilitated by front-line workers.

- advocates who work with teams/networks of elders/seniors or function as a single entry point to a network of supports.
- elder/senior-based interagency groups.
- multi-party working groups or committees of front-line workers and elders/seniors.
- front-line service groups who integrate and link elder/senior supports.
- volunteer groups supported by a coordinator.
- electronic information sharing sites.
- electronic case management mechanisms.
- a network of inter-related community-based workshops/town hall gatherings.

Service providers and policy makers drew on past interagency experiences to suggest building on existing groups rather than starting new ones. They said that effective interagency efforts in the past have worked best when supported by a paid coordinator who can follow-up and bring people together.

Service providers and policy makers identified issues that could potentially affect networks to prevent and respond to abuse of older adults. The main issues are:

- lack of awareness,
- lack of statistical data and documented anecdotal evidence of abuse,
- lack of ownership and responsibility for the issue, and
- lack of capacity to effectively participate.

Awareness and public education, and the proper authority, tools, and training are the keys to overcoming these issues.

While many agencies participating in this research said that they could support and participate in networks to prevent and respond to abuse of older adults, several would need the permission of a parent organization or permission to perform activities that are outside existing mandates. They also might need a terms of reference, protocol, written agreement, or policy guidance in order to participate.

Advice to the NWT Seniors' Society

Service providers and policy makers offered advice to the NWT Seniors' Society to support its work to prevent and respond to abuse of older adults. While older adults surveyed were not asked for their advice, their suggestions on ways to deal with abuse were similar in many ways. Service providers and policy makers advised the NWT Seniors' Society to:

- Advocate more aggressively for the safety of elders/seniors including a policy on abuse of older adults so front-line workers can intervene.
- Lobby for more than one Public Guardian and/or elders'/seniors' advocate position (e.g. regional positions) and more actively work on guardianship issues.
- More actively educate older adults and train front-line workers about abuse.
- Advocate for documentation and reporting of abuse of older adults.
- Take the Territorial Admissions Committee (TAC) to task on "bureaucratic assessments" and find different, team/case management approaches to placement.⁵
- Advocate for recreation programs for elders/seniors in every community.
- Advocate for standards and core funding for aged and handicapped and make this a mandated service supported by adult protection legislation or policy.
- Advocate for a shift to positive service responses to abuse of older adults.
- Advocate for more efficient issuance of Emergency Protection Orders.
- Have elders/seniors advocates in each community.
- Support elders/seniors groups in all communities.

⁵ The Health and Social Services website provides an overview of the TAC, including its mandate: http://www.hlthss.gov.nt.ca/english/services/long_term_care/territorial_admissions_committee.htm

1. Introduction

The abuse of older adults is a significant issue in Canada and the NWT. Most often older adults are victimized by someone they know, often a relative.⁶ The pervasiveness and impacts of abuse of older adults are reasons that the NWT Seniors' Society continues to seek ways to eliminate it. In a strategic planning session in February 2010, the Board of Directors of the NWT Seniors' Society recommitted to pursuing the goal of eliminating abuse of older adults in the NWT.

The NWT Seniors' Society has undertaken several initiatives to eliminate abuse of older adults including community-based/regional awareness workshops; a territorial gathering of elders/seniors and youth; research; and planning. The results of the Society's work are reported in such publications as *A Plan For Action 2004: Respect Our Elders - Stop The Abuse* and *Bridges Between the Generations (2005)*. While the NWT Seniors' Society continues to confront abuse of older adults, there remains a general lack of priority and resources to prevent and respond to it. Lack of awareness and documentation, and gaps in policy also challenge efforts to prevent and respond to abuse of older adults.

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⁶ http://www.phac-aspc.gc.ca/ncfv-cnivf/pdfs/fv-85-224-XWE-eng.pdf

The Making Connections Building Networks to Prevent Abuse of Older Adults Project (Building Networks Project) is the NWT Seniors' Society's current effort to prevent and respond to abuse of older adults. The Project was undertaken through a partnership with the Canadian Network on the Prevention of Elder Abuse (CNPEA), Fort Smith Senior Citizens' Society, Hay River Seniors' Society, Yellowknife Seniors' Society, HRSDC - New Horizons for Seniors Program, and the Government of the NWT, Health and Social Services. The Society struck a steering committee to oversee the Project and contracted with Lutra Associates Ltd. of Yellowknife to work on its behalf. The Building Networks Project Steering Committee has membership from the:

- Canadian Mental Health Association/NWT Division.
- Dene Nation.
- Inuvialuit Regional Corporation.
- Government of the NWT, Health and Social Services.
- North Slave Metis Alliance.
- Native Women Association of the NWT/Yellowknife Victims Services.
- NWT Seniors' Society.
- Public Health Agency of Canada.
- RCMP, Community Policing Section.
- YWCA Yellowknife.

2. Building Networks Project Objectives and Expected Outputs/Outcomes

The Building Networks Project has three phases. Each phase has specific objectives, outputs, and anticipated outcomes.

Phase 1:

Objective: Identify recent/current awareness, intervention, and prevention practices with respect to abuse of older adults in the various regions in the NWT through information gathering, analyses, and reporting activities.

Output: Phase 1 information gathering involved a survey of older adults and interviews with service providers, program developers, and policy makers in the NWT as well as a literature review of promising/best practices to address abuse of older adults. This report documents Phase 1 activities and findings.

Outcomes: Increased awareness for seniors, caregivers, and service providers about best and promising practices in the NWT, which could apply to other similar regions of Canada, in regard to activities, initiatives, projects, and programs to address the issue of elder abuse.

Phase 2:

Objective: Facilitate the establishment of information networks and share information on best/promising practices to address all aspects of abuse of older adults in the various regions of the NWT through an NWT-wide symposium.

Output: Phase 2 involves planning, facilitating, and reporting on a two-day NWT-wide symposium to enable networking and sharing of best/promising practices, and begin the process of building support networks. A symposium report will be produced at the completion of Phase 2.

Outcomes: Increased awareness for approximately 65 participants (half of whom will be seniors) from the NWT, about the issue of elder abuse, what works/doesn't, the resources available, and where they can be accessed. Networking through new links and partnerships created between 15 organization/groups of seniors, caregivers, service providers, and academics/researchers following the Symposium on the abuse of older adults in the NWT.

Phase 3:

Objective: Develop support networks for those involved in addressing abuse of older adults in NWT regions through internet, information, and support network development.

Output: Phase 3 - internet, information, and support network development activities will involve developing an electronic network as part of CNPEA, updating and advertising the Society's repository of information on the abuse of older adults, and a plan of action for developing and maintaining regional caregivers and service provider support networks. The main products of Phase 3 will be an electronic network, an inventory of information held by the Society, and an action plan for regional support networks.

Outcomes: Increased supports to caregivers and service providers and new tools added to the Repository that will contribute to the reduction of incidences of stress and burnout, help create a safer environment for vulnerable seniors and reduce the incidence of elder abuse in the NWT.

3. Phase One Approach and Methods

Under the guidance of the Building Networks Project Steering Committee, an appreciative inquiry approach was taken to the research. This approach attends to, and affirms, the best qualities of efforts to prevent and respond to abuse of older adults. The approach involves collaborative inquiry, based on affirmative questioning and positive engagement so as to collect and champion 'good news' stories and efforts to inspire and sustain efforts to address abuse.

3.1 Community and Regional Research

Community and regional research was undertaken to collect information on the perceived/actual extent and awareness of abuse, responses/interventions, and thoughts on networks. The research was designed to collect information from:

- 930 or 10% of older adults, 50 years of age and older, in selected communities representing all regions of the NWT; and
- a cross-section of 60 caregivers, service providers, program developers, and policy makers in the NWT.

Quantitative and qualitative social research methods were used. A structured questionnaire targeting older adults, and an interview guide for caregivers, service providers, program developers, and policy makers were developed (see Appendix A). The questionnaire was intended to be mainly self-administered or completed electronically. The interview guide was intended to focus face-to-face conversations between the researcher and service providers and policy makers. The two instruments were tested in Yellowknife among a small number of elders/seniors and service providers. Initial testing showed that both instruments were too complex and lengthy. Testing pointed to the need for plain, more familiar language such as 'elder abuse' rather than 'abuse of older adults', and 'working together' rather than 'networks'. The

Building Networks Project Steering Committee vetted the research instruments before they were brought to the field.

3.2 Research Communities and Sample

Resources available for the Project allowed for the involvement of at least one community in each region of the NWT. Eleven (11) NWT communities participated. Communities participating were selected because they:

- are partners in the Building Networks Project;
- were represented on the NWT Seniors' Society Board of Directors; and/or
- had demonstrated interest in addressing abuse of older adults (e.g. through past workshops or interventions).

The research began in June and extended through to October 2010 to accommodate summer schedules.

One-on-one and small group interviews targeted a mix of caregivers, service providers, program developers, and policy makers in the research communities. Ninety-eight (98) individuals in the 11 research communities participated (see Appendix B). Most interviews were conducted in person. In addition to individual interviews, 25 elders/seniors in Fort Good Hope met for a group discussion on abuse of older adults.

A stratified sample of 10% of adults, 50 years of age and older, in the 11 research communities was created for the survey (Table 1). The sample was representative of:

- age groups: 50 to 64, and 65 years and older;
- ethnicity: Aboriginal and non-Aboriginal; and
- gender: male and female.

The distribution of the sample is illustrated below.

Table 1: Survey Sample and Demographic Overview of Research Communities

	Sample Size	% 50 - 64 years	% 65+ years	% Aboriginal	% Male	% Female
Behchoko	35	62	38	93%	53%	47%
Fort Good Hope	15	45	55	90%	54%	46%
Fort McPherson	20	52	48	93%	53%	47%
Fort Resolution	15	64	36	88%	53%	47%
Fort Simpson	40	78	22	72%	51%	49%
Fort Smith	75	68	32	63%	50%	50%
Hay River	100	72	28	44%	52%	48%
Katlodeeche	15	68	32	100%	48%	52%
Inuvik	90	78	22	63%	51%	49%
Tuktoyaktuk	25	78	22	82%	55%	45%
Yellowknife*	500	85	15	23%	51%	49%

^{*}Includes Ndilo and Dettah

At the outset, disparities between small and larger communities due to size, socioeconomic circumstances, and access to services and supports were recognized as factors potentially impacting the research. Further, the large number of older adults in Yellowknife (more than half the sample) had the potential to skew results. These factors were considerations in data reporting. For instance, where there are differences in the responses of older adults living in Yellowknife and those living in other research communities, these are reported.

The research team used a variety of methods to involve older adults in the survey, including: one-on-one interviews, home visits, telephone interviews, social events such as family night and elders'/seniors' luncheons, and interview tables set up in local grocery stores. Incentives were provided in several communities (e.g., eligibility to win gift cards/gifts from the NWT Seniors' Society). In other communities, local people volunteered or were employed to assist in administering the questionnaire or provide Aboriginal language translation/interpretation. The questionnaire was available on-line through the NWT Seniors' Society website and promoted through the Government of the NWT's newsletter *Bear Facts*. The questionnaire was also distributed electronically

through various social networks and work places including the Inuvialuit Regional Corporation and North Slave Métis Alliance. In the early stages of the research, two questionnaires were administered in the Fort Smith long-term care facility. Following that experience, the questionnaire was not administered to older adults in care facilities due to the potential to impact data reliability (e.g. due to cognitive abilities).

A total of 528 questionnaires were completed. The geographic distribution of completed questionnaires is shown in Table 2.

Table 2: Building Networks Project - Survey Sample and Completed Questionnaires by Community

	Sample Size	Completed
Behchoko	35	33
Fort Good Hope	15	14
Fort McPherson	20	22
Fort Resolution	15	15
Fort Simpson	40	22
Fort Smith	75	42
Hay River	100	68
Katlodeeche	15	14
Inuvik	90	31
Tuktoyaktuk	25	31
Yellowknife, Dettah		
Ndilo	500	226
Other	0	14
Not Identified	0	10
TOTAL	930	528

While the research was designed to capture 10% of adults 50 years of age and older in the 11 communities, approximately 6% of this population participated in the survey. Overall, the target sample was achieved in smaller communities but not in regional centres or Yellowknife. The participation of older adults in smaller communities was likely facilitated by greater cohesion and connection within the community and among older adults, more discussion and awareness of abuse, and more visible incidences of abuse of older adults.

Several factors contributed to a lower than anticipated response in larger communities, including:

- difficulty identifying and accessing older adults particularly those in the work force;
- lack of awareness and/or interest in the issue;
- lack of identifiable connection to abuse of older adults;
- age sensitivity and unwillingness to participate in an age specific issue;
- perceptions that this is an Aboriginal issue (and does not affect them);
- concerns for privacy; and/or
- discomfort with the questions asked.

3.3 Characteristics of Older Adults Surveyed

Older adults surveyed live primarily in the 11 research communities although a small number of questionnaires (14) were completed on-line by older adults in other NWT communities. Overall, the characteristics of older adults surveyed differed somewhat from the sample strata.

- About two-thirds of the sample included older adults, 50 to 64 years of age. Among older adults participating in the survey, 70% were 50 to 64 years of age and 30% were 65 or more years of age.
- In the 11 research communities, about three-quarters of the population 50 or more years of age has Aboriginal ancestry. Only 57% of older adults surveyed identified their cultural/ethnic background as Aboriginal.
- In the 11 research communities men make up slightly more than half of the population 50 or more years of age but the majority (61%) of older adults participating in the survey are women.

A reluctance to talk about abuse and participate in the research, lower participation in larger communities, and a perception that abuse of older adults is a women's issue may be among the many reasons that older adults surveyed do not mirror the sample strata.

Other characteristics of older adults surveyed are:

- 95% own their own home and/or live independently.
- 59% have grade 12 or more education.
- 49% have lived in the NWT all their lives and another 36% have lived in the NWT for 25 or more years.

3.4 Literature Review

Concurrent to field research, a literature review was undertaken to identify best/ promising practices and lessons from efforts to create awareness, intervene in, and prevent abuse of older adults. The review targeted northern remote communities in Canada (e.g. Nunavut, Nunavik, and Yukon) and locations elsewhere in the world with similar social, cultural, and remote geographic circumstances (e.g. Scandinavia and Australia). The literature review did not address the extent and awareness of abuse of older adults.

3.5 Report Structure

Literature review and research findings are reported in accordance with the Phase 1 research objective, specifically:

- extent and awareness,
- intervention, and
- prevention practices.

The research also reports findings on:

- networks, and
- advice to the NWT Seniors' Society.

4. Findings

Findings are drawn from the literature review, survey of older adults, and agency/front-line worker interviews.

4.1 Extent and Awareness of Elder Abuse

The Literature Said ...

It is estimated that between 4% and 10% of older adults in Canada experience some type of abuse.⁷ In Canada, older adults (65 years of age and older) tend to have lower rates of police-reported victimization than younger age groups. In 2009, the rate of police reported violence against this age group was two and half times lower than the rate for the second oldest age group (55 to 64 years), and about 15 times lower than the highest at-risk group (15 to 24 years of age). That being said the rate of family violence against seniors in Canada increased by 14% between 2004 and 2009.⁸

There are no published estimates of the incidence of abuse of older adults in the NWT. There may be information on segments of the older adult population who experience abuse for example, older adults who seek Emergency Protection Orders, use family violence shelters, receive assistance from victim services, or call the NWT Seniors' Society Information Line.

⁷ Elder Abuse in Canada; Preliminary Overview of the Issue, August 2007. National Seniors Council (unpublished).

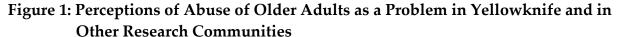
⁸ Statistics Canada, Canadian Centre for Justice Statistics. January 2011. Family Violence in Canada: A Statistical Profile (http://www.statcan.gc.ca/pub/85-224-x/85-224-x2010000-eng.pdf)

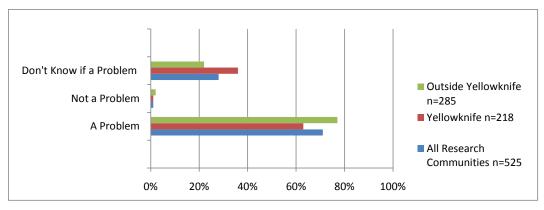
Abuse of older adults is frequently raised in social research and planning work in the NWT. For example, recent mental health and addictions research conducted in the Inuvialuit Settlement Region (Inuvialuit Regional Corporation, March 2010) found that elder abuse was acknowledged in most communities. Extreme isolation and physical and financial abuse were most often mentioned. The research reported the words of one elder (see sidebar).

"Some of us elders get hurt by kids, especially on pension day. I see it and I am one of them and we are not talking about it. I have to put up with it. It is rough to be abused by your own kids."

Older Adults Surveyed Said...

The majority (71%) of older adults 50 or more years of age surveyed identified abuse of older adults as a problem in their community. A noticeable portion (28%) indicated that they did not know if abuse is a problem in their community (Figure 1). Compared to older adults living in Yellowknife, older adults in other communities were more likely to identify abuse of older adults as a problem - 77% compared to 63%. More older adults surveyed in Yellowknife don't know if abuse is a problem than their peers living in other communities – 36% compared to 22%. More women (73%) than men (68%) identified abuse as a problem in their community.





Reasons for identifying abuse as a problem were related primarily to personal or professional experiences and observations or references to stories heard in the community. Those unaware of abuse of older adults seemed to have had few personal or professional encounters with abuse although many said that they suspect that it might be a problem. The very small number (1%) who said that abuse of older adults was not a problem in their community based this opinion on lack of personal experience of abuse or not hearing anyone talk about abuse.

Many of the 25 elders/seniors in Fort Good Hope who met to discuss abuse of older adults said that they and others live in fear, especially if they are vulnerable and/or if someone bears a grudge against them. Elders/seniors often go out on the land to get away from violence in the community but when they are away, youth damage their property (e.g. break their windows and destroy their skidoos). In Fort Good Hope, some children and grandchildren go into elders'/seniors' homes at night to look for money and cigarettes. Youth break into houses and steal items, then sell or give them to their parents. Some parents encourage their children to act out grudges on their behalf (and get offended if their children are reported and/or charged). Often these grudges involve retaliation against elders/seniors.

Older adults surveyed were asked to identify the kinds of abuse that is common in their community. All forms of abuse exist but more than three-quarters (77%) of older adults surveyed identified financial abuse; more than two-thirds (68%) identified neglect; 63% identified emotional abuse; and 54% identified verbal abuse as most common (Figure 2). Less common forms are physical abuse (38%) and sexual abuse (17%). Almost one-fifth (19%) of older adults surveyed did not know the most common form(s) of abuse.

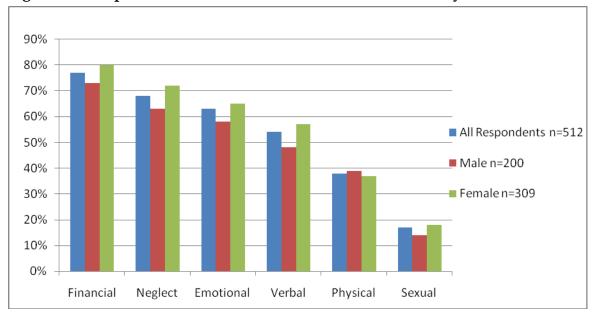


Figure 2: Perceptions of the Most Common Forms of Abuse by Gender

Older men were more likely than women to identify physical abuse as a common form of abuse but older women were more likely to identify all other forms of abuse as common. Financial abuse was more often identified as a common form of abuse in communities outside of Yellowknife (83%) than in the city (70%). Financial abuse and neglect were identified as the most common forms of abuse in Yellowknife.

The questionnaire asked older adults about awareness of abuse among elders/seniors in their community. For example, older adults were asked to consider whether elders/seniors in their community know they have the right to live without abuse. Less than half (40%) believe that there is awareness of this basic human right while 37% were unsure (Figure 3). Other highlights from these questions include:

- 47% of older adults believe that elders/seniors in their community don't know how to protect themselves from abuse;
- 36% believe that elders/seniors don't know where to go for help;
- 52% believe that elders/seniors don't speak out about abuse,
- 41% are not sure if elders/seniors know that abuse is a crime;
- 48% are not sure if elders/seniors want to work with others to stop abuse.

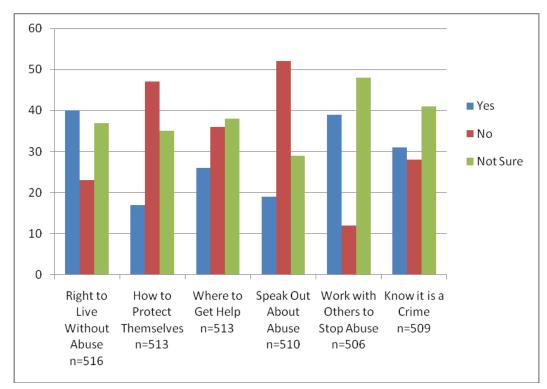


Figure 3: Views on Elders'/Seniors' Awareness of Abuse in Research Communities

As illustrated in Table 3, place of residence (e.g. Yellowknife or in another community) seems to be more of a factor than gender in older adults' views on the awareness of elders/seniors in their community. Older adults surveyed in Yellowknife were less certain about elders/seniors compared to their peers in other research communities. Generally, older men and women surveyed tended to share similar uncertainties about elders/seniors in their communities.

Table 3: Views on Elders'/Seniors' Awareness of Abuse by Older Adults in Yellowknife, Other Research Communities, and by Gender

	Know their Right to Live Without Abuse		Know How to Protect Themselves		Know Where to Get Help		Speak Out About Abuse		Want to Work with Others to Stop Abuse			Know Abuse						
	Y	N	NS	Y	N	NS	Y	N	NS	Y	N	NS	Y	N	NS	Y	N	NS
	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
Men	38	23	40	18	46	36	25	37	38	16	51	33	40	13	47	30	29	42
Women	41	24	36	17	48	35	27	35	38	20	53	27	39	12	49	31	28	41
Yellowknife	33	27	40	11	48	41	15	37	49	16	52	32	29	12	59	21	24	55
Other	45	21	34	22	47	31	35	36	29	21	53	26	47	13	40	38	32	31
Comm.																		

Y= yes N=no NS=not sure

Service Providers and Policy Makers Said...

Incidence

Service providers and policy makers had difficulty identifying the incidence of abuse of older adults due mainly to under-reporting, lack of or inconsistent documentation, and inadequate systems to capture data. In most NWT communities, information about elder abuse is anecdotal. Workers in every community had stories about:

- the neglect and abandonment of elders/seniors;
- elders/seniors who are not heard or listened to;

- elders/seniors who are made responsible for children for lengthy periods of time without any resources to do so;
- family members and others taking elders'/seniors' bank cards and using them as their own and withholding financial information;
- elders/seniors harassed for money particularly at pension time or when residential school payouts were made;
- family members who take elders'/seniors' food or take elders/seniors to the store to buy them things;
- signs of physical abuse and neglect such as malnutrition and bruising;
- yelling, pushing, and shoving of elders/seniors in the home;
- fights with elders/seniors in the home over money;
- elders/seniors being defrauded out of money; and
- elders/seniors being visibly afraid of certain family members.

"As a kid I saw my grandparents being financially abused. I don't think that they even realized that they were being abused."

Front-line workers said that they hear mainly about the financial abuse of older adults and see the neglect and abandonment that is often associated with it (e.g. elders/seniors coming to food banks because they have had their pension money or food taken from them, or brought into care due to neglect and malnutrition). In several communities, horrific incidents of medications being withheld and elders/seniors being physically assaulted, sexually abused, or forcibly confined were mentioned by some front-line workers. Front-line workers in several communities said that elder abuse "happens more than we realize." Still, in at least one research community, some front-line workers suggested that there does not appear to be much elder abuse. "There may be a handful of elders who drink that are abused."

Homecare workers, housing maintainers, long-term care workers, RCMP, and workers with non-government/community organizations including shelters were most likely to know about abuse of older adults. "Homecare are (the) eyes and ears." They may document abuse in client files but these data are not reported in any official NWT statistics. The two community agencies most commonly responsible for safety in NWT communities –Social Services and the RCMP - do not keep information on abuse of

older adults. Although the RCMP codes crimes including domestic violence, there is no code for abuse of older adults. Further, it is difficult to break down RCMP stats to determine how many victims of Criminal Code offences are elders/ seniors.

Front-line community agencies said that few incidents of abuse of older adults are reported. In several communities the RCMP said that they receive few complaints involving elders/seniors and few if any, Emergency Protect Orders (EPOs) related to abuse of older adults have been requested or issued. Similarly, victim assistance workers and justice committees reported few if any, incidences of abuse being brought to them.

Whether the incidence of abuse is increasing or decreasing was difficult for front-line workers to assess. Many said that if abuse exists, "usually it has been going on for a long time." Some front-line workers noted that the incidence is increasing due to changing lifestyles, more demand for money, and present day family dynamics including weak family relationships and lack of respect for elders/seniors. Some said the situation is getting worse "because the inter-generational dysfunction in families is so great." Others said it is decreasing due to more/better housing for seniors, more employment, social services, more awareness of abuse, and elders/seniors being more aware of their rights. The Family Support Centre in Hay River and the Inuvik Transition House are two agencies that are seeing more elders/seniors coming to shelter and asking for information.

While there are no data on the incidence of abuse of older adults in NWT communities, front-line workers in some communities estimated incidence based on the populations they serve and in recognition that as older adults are less able to care for themselves, abuse becomes more visible. Front-line workers who regularly care for older adults in their home or in a care facility estimated that:

- In Inuvik 95% (35 of 37) of homecare clients are likely abused either financially or emotionally. In the 25-bed Inuvik long-term care facility (which includes three beds for respite), 60% to 70% of admissions are due to abuse and neglect.

- In Fort McPherson, 80% of the some 50 chronic care patients are thought to be at risk of abuse, including eight seniors in public housing, and 10 to 15 elderly women in the community.
- In Tuktoyaktuk, 15 or more of older adults are thought to be enduring abuse.

Older adults don't report abuse. There are several reasons for this, including:

- shame and guilt,
- lack of recognition of abusive behaviours/patterns,
- fear of hurting family members,
- denial or rationalization,
- fear of reprisal or loss of independence,
- fear of authority,
- lack of knowledge of who can help,
- lack of confidence that helping agencies will or can do anything (e.g., elders/seniors may feel that there is nothing to help them),
- lack of confidence that they will be taken seriously or receive a positive or culturally appropriate response,
- having nowhere to go in the community (and not wanting to go into care in another community),
- co-dependency and fear of loneliness or withdrawal of care, and
- unwillingness to be a burden on family members or others in the community.

Service providers said that older men are especially reluctant to disclose abuse. They said that both older men and women don't know where to draw the line between supporting their families and supporting themselves and they don't want to feel guilty about not helping. Elders/seniors honour their traditions of sharing. They "are caring people and will always look after each other. Elders will give away their money to people" who need it. "People share, but they may not recognize that when it comes to a point where it is not comfortable for the elder, then it is abuse." Further, service providers said that elders/seniors don't want to lay changes or go running to the police for everything. They don't want to betray family loyalties and/or step away from their responsibilities for helping their families. Issues of disclosing abuse are complicated by

the fact that some people who abuse older adults are in positions of leadership and trust in the community and/or their caregivers. Elders/seniors recognize the power these people have over their lives.

Some homecare workers contended that communities and families know that abuse of

older adults is wide spread but "no one wants to get a grip on it because it is so difficult to delve into family relationships." "Elder abuse is a very emotional issue." In some interviews with local service providers and leaders, it was noted that abuse of older adults in the NWT is looked at through 'Western eyes' and is insulting to Aboriginal northerners because "Aboriginal people take care of our elders."

"Elders say that all they have left are their children and all they have to give them is money. In their minds they are not being abused."

Many community agencies are aware that older adults lack of confidence that local service providers can intervene in cases of abuse. As an example, the RCMP said that they often find that financial abuse is difficult to investigate due to informal agreements among family members that involve "cash for care giving." (When there is an agreement of this nature, financial abuse may be a civil rather than a criminal matter.) More than one service provider noted that victims and people who witness abuse are not reporting because the police are not laying charges. "Why do we have to jump through so many hoops to get the police to lay charges… Why can't the RCMP lay charges as required under the Prevention of Family Violence Act (Protection Against Family Violence Act) as they do when there is violence against women."

Factors Contributing to Abuse of Older Adults

Like other forms of abuse, abuse of older adults is complex. Service providers and policy makers interviewed identified several inter-related factors that contribute to abuse. Overall these factors vary little among the NWT communities participating in this research.

Factors are related to circumstances that are well known and documented in social research in the NWT, specifically:

- most reported crimes and crimes of violence are related to alcohol or another addiction;
- addictive behaviours are "rampant" in many communities;
- affordable housing is scarce in all NWT communities;
 and
- intervention services are inadequate in most communities.

"Poverty creates the co-dependency and sets people up for abuse."

A lack of affordable housing and housing options including homeless shelters mean that often family members or other individuals move in with elderly parents or unattached elders/seniors in the community. In the NWT, individuals 60 or more years of age living in public housing units do not pay rent. When an elder/senior (lessee) in a public housing unit has an employed individual residing in their home, the lessee pays an economic rental rate. The lessee is responsible for the rent whether or not other residents contribute. If rental arrears occur the elder/senior is at risk of eviction. While many elders/seniors may like and need the company of a younger family member(s), stories are told in every community of older adults becoming homeless, forced into care, or becoming ill because they lack the resources to pay housing costs or lack the supports to deal with the stresses of their living circumstances. There are stories of elders'/seniors' well-being and safety being compromised (e.g. by partying, overcrowding by long term 'couch surfers').

Elders'/seniors' pensions are one of the few secure and predictable sources of income in many northern homes where opportunities to earn income are few. "Lots of elders have children and grandchildren who are financially dependent upon them." Some front-

line workers reported an attitude within certain families that "elders owe family members money." Pensions may also "be a means to a meal or party." In some communities,

"Everyone knows when the cheques come in."

elders/seniors are a target for those with drug, alcohol, or gambling addictions. For

instance in Fort Resolution, the estimated 30 bootleggers market their drugs and booze to older adults. "Bootleggers visit elders' homes and harass them to make purchases." In larger communities such as Fort Smith and Hay River, pension time may mean that elderly men who are lonely become a target of younger women who exchange sex for money, rides, alcohol, or drugs.

Elders/seniors are often viewed as a source of money that can easily be exploited, especially if the elder/senior has addictions him/herself. In many communities, there is little empathy and poor attitudes about those with addictions issues. Some service providers contended that some elders/seniors encourage disrespect through their drunkenness or indecencies.

"Parenting is at the heart of all the abuse. Kids are not taught or disciplined."

A host of other factors contribute to abuse of older adults. Service providers and policy makers identified these factors as:

 weak family relationships characterized by a loss of respect, care, and concern for elders, and disconnect among the generations.

"While elders should be shown respect, they must also earn respect."

- a value shift from people to things, with elders/seniors honouring values of sharing with and looking after others, and younger generations taking without caring or sharing.
- intergenerational factors including long standing family disputes and histories and experiences of abuse in the home.
- tolerance and acceptance of abuse.
- isolation and exclusion compounded by ill health, low literacy, a language and cultural disconnect with the mainstream (e.g. exclusions from community activities, lack of awareness of or understanding of how to assert rights).
- co-dependent relationships between adult children and elders/seniors, reinforced by physical and communication/information barriers that oblige elders/seniors to depend on others to buy food, pay bills, etc.

- silence and people not speaking out about abuse, lack of awareness, public education and prevention, and too much blaming of victims (for not taking action).
- caregiver burnout and associated resentment, frustration, anger and abuse. This can be a factor in the home as well as in care facilities. In long-term care facilities, staff are caring for more clients with complex medical conditions and
 - challenging behaviours related to cognitive decline (e.g. dementia and Alzheimer's). Heavier workloads, coupled with staff shortages and insufficient training and education can contribute to neglect.

"Elder abuse is where spousal abuse was at in the 1970s."

• ageism and lack of knowledge about the ageing process contribute to negative attitudes, incorrect assumptions, and abuse.

Service providers also identified systemic factors that contribute to abuse of older adults. For example, closure of community-based care facilities mean that elders/seniors are vulnerable, isolated, or neglected in their homes or relocated to extended care/dementia facilities in larger centres because their care needs extend beyond a family/community's resources. Service providers say that elders/seniors relocated for care in another community are aware that they won't be visited by family members and feel that they are being sent away to die.

Other systemic factors that potentially contribute to abuse are:

- homecare guidelines that withhold services to elders/seniors until they are sober, have a medical referral, or are specifically requested by the elder/senior.
- lack of resources for elders/seniors' activities (e.g. luncheons and outings).
- inadequate, appropriately trained staff to support elders/seniors.

Lack of appropriately skilled staff together with unsupportive policies mean that agencies may be unwilling to use the tools that they have or to seek more tools (e.g. policy and legislation) so they can intervene in abuse.

4.2 Current Responses and Interventions

The Literature Said ...

A chronology of important actions in the NWT to prevent family violence including elder abuse between 1999 and 2010 is attached in Appendix C. In 2002, the Government of the Northwest Territories, with participation from the NWT Seniors' Society, completed a review of seniors programming, including a technical analysis of current programs and services. The Government of the Northwest Territories' response to the *Review of Programs and Services for Seniors* (February 2002) was published in *Seniors' Action Plan 2002-2003 Response to Review of Programs and Services for Seniors* (June 2002). The following year the Government of the Northwest Territories released *Seniors' Action Plan Status Report*, which detailed the progress made - to the end of April 2003 - on each action item included in *Seniors' Action Plan 2002-2003 Response to Review of Programs and Services for Seniors*. The Government of the Northwest Territories has not updated these documents.

Throughout the last decade, the Coalition Against Family Violence (CAFV) has taken leadership in family violence research, planning, and policy development. In 2003, CAFV created and submitted the *NWT Action Plan on Family Violence* 2003-2008 to the GNWT. The NWT Seniors' Society as a founding member of CAFV followed in 2004 with *A Plan For Action Respect Our Elders – Stop The Abuse* that put forth 11 recommendations for action to prevent abuse of older adults.

The GNWT response to the CAFV's action plan was included in *A Framework for Action* 2003-2008 and the *NWT Family Violence Action Plan: Phase II* (2007-2012). *Building Our Future* provides the current strategic direction to GNWT Justice, Health and Social Services, and the Executive. Important actions on family violence have included:

- the enactment of the *Protection Against Family Violence Act* in 2005;
- implementation of Emergency Protection Orders;
- operation of the 24 hour crisis line; and

 staffing of family violence positions in GNWT Departments of the Executive and Justice.

The Department of Health and Social Services is the lead department on the *NWT Family Violence Action Plan: Phase II*. The Department supports the work of the five territorial family violence shelters to make their services more accessible and useful to women fleeing violence/abuse. Health and Social Services has consultant positions for seniors and family violence, and provides funding to support the NWT Seniors' Society to create awareness of abuse, support elders/seniors, and operate the Seniors' Information Line.

CAFV and the NWT Seniors' Society have delivered family violence workshops in many NWT communities to improve awareness and empower older adults to speak out about abuse. The NWT Seniors' Society 'Bridging the Gap' conference in 2005 was a significant effort to bring attention to abuse of older adults. A pan-territorial information campaign launched in 2010 and resources listed on NWT Justice and Health and Social Service websites are ongoing initiatives to improve awareness of family violence/abuse of older adults.

Depending on the size of the population, NWT communities may have access to some or all of the following services to respond to abuse of older adults:

- community social service staff to respond to the social issues of at risk families and individuals through assessment, intervention, counselling, referrals, case management, and follow-up.
- community wellness, healing, or mental health services for addictions, trauma/post-traumatic stress, and other mental health needs.
- community health centre staff who provide basic medical treatment and prevention, public health, health promotion, and homecare services.
- community justice committees who usually hold sentencing circles and recognize local traditions and practices to provide an alternative to the courts.
- victim services workers (mainly in regional centres) who help victims in court proceedings and prepare victim impact statements.

- community police (RCMP) who provide education, law enforcement, and protection services.⁹
- seniors housing, maintenance and tenant relations staff.
- community groups/individuals who provide informal or project specific family and individual supports.

Friendship Centres are located in seven of the largest NWT communities.¹⁰ On a project basis - pending funding - they offer family life, healing, and other services for older adults (i.e. luncheons, transportation, information, and advocacy). Seniors' societies are located in a mix of large and smaller NWT communities and typically focus on social and advocacy needs of older adults at the community level.¹¹ Many communities also have elders groups that are connected with community, regional and territorial Aboriginal organizations.

Family violence shelters located in Hay River, Fort Smith, Yellowknife, Inuvik, and Tuktoyaktuk provide safe shelter and support to women and children fleeing violence in the home. Recent research has identified the need for more shelters for "elders and adult men needing safety or just tired of depending on or have had worn out their welcome with family or friends" (Inuvialuit Regional Corporation, March 2010, p.4). The YWCA Yellowknife, on behalf of a group of women's organizations, is leading a project in small NWT communities without RCMP detachments to assist those communities to increase safety options for women facing abuse.

The GNWT responds to the prevention of abuse of older adults in the NWT within the context of family violence. A 'social response lens' is the preferred approach for responding to individuals who report family violence.¹² Victims who receive positive

.

⁹ NWT communities with no resident RCMP include: Dettah, Colville Lake, Tsiigehtchic, Nahanni Butte, Wekweètì, Enterprise, Kakisa, Ndilo, Trout Lake, Katlodeeche, Gameti, and Wrigley.

¹⁰ Rae Edzo, Fort Providence, Fort Simpson, Fort Smith, Hay River, Inuvik, and Yellowknife.

¹¹ Yellowknife, Fort Smith, Fort Simpson, Hay River, Tuktoyatuk, Fort Resolution and Fort McPherson.

¹² Social responses are the ways that individuals, families, organizations and communities respond to family violence. Positive social response include: adequate and accessible safe housing and financial resources for family members experiencing violence; relevant counselling and support programs for all family members; and communities and community leaders that condemn family violence and publicly support attitudes that acknowledge the harmful impact of family violence.

social responses that, for example, avoid blaming the victim and excusing the perpetrator, are more likely to seek help in a timely manner, and benefit from social and protective services and resources. Vulnerable families and individuals in remote communities are more likely to experience negative social responses mainly due to limited services. Individuals/families experiencing negative responses may avoid authorities, withhold information, isolate themselves, stay in contact with the perpetrator, and use language that is self-blaming.

Older Adults Surveyed Said...

Some older adults surveyed have taken action on abuse. Several older adults have acted as an advocate or intermediary with a service provider or provided personal support or safety to an elder/senior. Examples of these actions are:

- calling the RCMP,
- getting involved in social events to bring elders/seniors out,
- doing home visits,
- helping elders/seniors budget and manage their money,
- confronting abusers,
- explaining rights and encouraging elders/seniors to speak out, and
- talking about abuse in the community and with older adults.

Service Providers and Policy Makers Said...

With the exception of those agencies with responsibility for the day-to-day care of elders/seniors (e.g., long-term care facilities), community/regional agencies in the NWT have unclear or limited authority and/or responsibility for responding to abuse of older adults. Several service providers and policy makers interviewed identified the lack of adult protection services as a main problem limiting positive responses to elder/seniors experiencing abuse. In the absence of clear or appropriate agency responses, service providers may intervene to the extent they can. In several communities, service providers and volunteers have talked to suspected perpetrators and victims about financial abuse. They may do this within their professional capacity or on their personal time.

Generally, service providers said that the onus is on the victims to report abuse. Service providers mainly respond to abuse within existing mandates or program frameworks (e.g. as part of seniors' housing services). The main response of front-line service agencies is to refer an elder/senior identifying abuse to another agency, most likely the RCMP. They also may refer to the medical system, for example, a care facility. Common legal or medical remedies were described as "overtaxed, punitive or confrontational" and undesirable responses for elders/seniors. These remedies may result in lengthy court challenges, elders/seniors being brought into care, or loss of independence including giving over their affairs to the Public Trustee/Guardian or an individual with power of attorney. Several service providers agreed that "seniors tend to be non-responsive when the RCMP gets involved."

Organizations responsible for the care of elders/seniors in care facilities advocate for client safety and tend to take a multi-disciplinary approach to interventions. For example, at the Judith Fabian Group Home serving the Katlodeeche First Nation, the Yellowknife Association of Concerned Citizens for Seniors (YACCS), and the Inuvik Hospital long-term care facility, staff may contact the Public Guardian/Trustee if clients are at risk of abuse and do not have a guardian. (Most elders/seniors coming into longterm care in Inuvik are under the Public Guardian). They may assist with guardianship forms or seek out a family member willing to assume power of attorney. They also seek ways to engage family members in special meetings and events such as birthdays and at Christmas. For example, long term care staff in Inuvik use tele-health facilities to link patients with family members in other communities. Still, these and other service providers said that family engagement is extremely challenging even though it is the one thing that elders/seniors value most. In larger communities with more resources, service providers often work with medical social workers to contact family members or develop care and safety plans if they are being discharged from a facility and/or with a community social worker to assess the home, victim services/RCMP to do safety planning.

Due to trust relationships, elders/seniors are most likely to talk to homecare workers about abuse. While homecare workers are key players in the lives of elders/seniors vulnerable to abuse, homecare workers lack policy guidance to respond to abuse. "Homecare workers' hands are tied." They can refer clients to a long term care facility for respite and safety, or talk to social service and health centre staff, and/or the RCMP if they suspect

"We get calls from community nurses who want to admit elders into longterm care to get them away from the abuse."

abuse. If an elder/senior discloses abuse to a worker, he/she must advise that a response may mean discussing this information to other front-line workers. Often this results in the elder/senior asking the worker not to say anything to anyone.

Many homecare workers go beyond their mandate and risk their own safety and relationships with clients and their employment, to intervene in situations of abuse. In one community, a homecare worker who brought food to an older adult because the family had taken all his supplies, was bullied by a family member who "was afraid of being found out." Homecare workers are known to have intervened when family members use elders'/seniors' bank cards (e.g. by working with the bank or local store to screen/control use). In some communities, service providers said that homecare workers are best positioned to respond to abuse because they are in the home, are likely to be community people who understand family dynamics, and have more flexibility than, for example, nursing or social worker staff (who must adhere to professional standards). While homecare workers may be in a good position to respond to abuse of older adults, ad hoc, personal interventions or "dealing with things between the lines" are inadequate and inappropriate.

Public Health in Inuvik, which has responsibility for homecare, works with the long-term care facility to run the Elder Day Program. The Program engages elders/seniors in care as well as those in the community. The Program operates four days a week from 10 am to 3 pm and averages about 15 participants daily. Elders/seniors are picked up by a handi-van, participate in activities, and have snacks and lunch. In other communities, the Community Health Representative (CHR) works with homecare or wellness workers to do home visits to socialize and check-up on elders and act as advocates.

Local housing organizations have responsibility for community-based seniors' homes and public housing units occupied by seniors. In most communities, these are independent units so there are no active interventions beyond those related to damage to the property/unit or rental arrears. Some housing organizations have hired security personnel to guard seniors' housing units. Housing personnel hear frequent complaints from elderly tenants when children/ grandchildren move into their units uninvited. However, staff with some housing authorities say that if they "confront the children/grandchildren, the elders do an about face and defend the children." Many housing organizations, mainly through the advice or information of front-line maintenance workers, contact family members, the RCMP, social services or income assistance if abuse is suspected.

In some communities, housing staff are extremely frustrated that elders/seniors will not press charges against those causing them harm or damaging their property. In some cases housing staff have refused to help elders/seniors unless they help themselves. In other communities, the local housing authority has worked with community members to lobby for a local 24/7 care facility. For example, a coalition of elders/seniors and community groups in Fort McPherson are lobbying for a care facility as a means to keep elders/seniors safe and cared for. In Fort Resolution, the Hamlet and local housing organization have written to the GNWT Minister of Social Services regarding the reinstatement of nursing home care services at the Great Elders Centre. At the time of writing, no support has been forthcoming from the GNWT on these requests.

The RCMP responds to all reports of abuse of older adults from victims, third parties (e.g., public housing, social, homecare, and community wellness workers), and anonymous reports. Complaints of abuse are investigated and charges may be laid under the Criminal Code (e.g. harassment in the case of verbal abuse; theft or fraud in the case of financial abuse; criminal negligence in the case of neglect). For charges to be laid, usually a victim or witness statement is required. If evidence is

"Elders are letting it happen because they don't want their grandchildren to go without even though it means they (the elder) will go without."

collected and charges are laid, the offender may go through the courts or be diverted through the local justice committee. The RCMP will follow up with victims regarding court dates, court proceedings, referral to victim services, etc. In some communities, RCMP officers are proactive on crime prevention through greater visibility in the community (e.g. foot and bike patrols) and education including informal meetings and gatherings (e.g. elders/seniors meetings and luncheons).

Victim assistance services are available in some NWT communities. Cases of abuse of older adults are rarely brought to these workers. Victim assistance includes emotional support; information (e.g. on the legal system, criminal proceedings, safety planning, case status and victim impact statement (VIS); referrals to other community programs; assistance with crisis intervention and court preparation; and help with the VIS and restitution requests.

Community justice committees function in many NWT communities. These committees often include local elders/seniors. Community justice committees take referrals from the courts and the police. When an offender is diverted to a community justice committee, a 'circle conference' is held to enable the offender to take responsibility for, and understand the consequences of his/her actions. Offenders appearing before a justice committee may receive community service (alternative measures) remedies that are monitored by the committee's coordinator. Community justice personnel may also provide active support to victims of crime (e.g. through referrals and information). Some service providers suggested that community justice committees are not always well educated about or able to advocate on behalf of older adults who are abused.

Community-based social and wellness workers tend to have minimal involvement with

abuse of older adults mainly due to the absence of legislation or policy giving this authority to these workers. Social workers mainly focus on child protection. Their responses to abuse are within the broad purview of responsibilities for aged and handicapped (for elders/seniors living in supported living facilities), and addictions, mental health, and family violence activities. Abuse of older adults is brought to the attention of social and wellness workers mainly through the provision of other services. Workers suspecting, witnessing, or given a

"Right now social services are not equipped to respond in a meaningful way to an elder presenting with elder abuse. We need to provide extra training for social workers."

referral about elder/senior abuse ask the individual if they want help. Help offered tends to be information about services available within their agency (e.g. counselling or family interventions) or a referral to another agency. Referrals are often to the RCMP or a community leader (e.g. the Chief). Workers may also refer older women to a family violence shelter; recommend respite for the elder/senior to provide safety or protect the individual's health; and/or convene a family meeting/conference to discuss the issue.

While front-line health and social service staff work hard to integrate services to provide a wider range of interventions, policy gaps for adult protection and a specialized approach to services limit the scope of practice and response to abuse. Several service providers said that to be truly integrated, social and health agencies in all communities need to take a broader perspective and have the capacity to respond to any issue an individual presents.

Family violence shelters are active on abuse of older adults within the overall framework of family violence. To the extent that resources allow, shelters participate in or sponsor awareness activities. For instance, the Hay River Family Support Centre was part of an advisory panel for research on abuse of older adults sponsored by Native Women's Association of Canada. When an elder/senior comes to the Centre, they are respected and assured that their environment is safe. In the past few years, the Centre has stopped doing outreach to elders'/seniors' homes due to worker safety. Some older adults fleeing from abuse end up in homeless shelters located in Fort Smith, Yellowknife, and Inuvik.

Community-based organizations respond to elder abuse in an ad hoc way, mainly as project funds become available. Friendship centres such as the Soaring Eagle Friendship Centre in Hay River and Ingamo Hall in Inuvik hold elder social functions (e.g. luncheons, bingos, old time dances, and feasts). The Yellowknife Seniors' Society also holds weekly luncheons and a variety of regular social and exercise activities, and Fort Smith Senior Citizens' Society holds regular social and recreational events. Seniors' groups in other communities also sponsor elders/seniors events as resources become available. Few groups are active on abuse issues.

Aboriginal organizations tend to engage elders/seniors in committees and advisory functions on political, land, and resource issues at the community and regional levels. In its recent regional mental health research, the Inuvialuit identified the need to strengthen the role of elders/seniors in all aspects of community life. As one policy maker in the NWT noted, "elders' contributions and value are just 'lip service' and rhetorical."

Social programming provided by Aboriginal organizations tends to be limited to project specific endeavours or occasional elders'/seniors' outing or events. There is a sense in some regions that Aboriginal organizations are stepping back from social programs due to the lack of social funding both from governments or from return on investments (e.g. due to the economic downturn), and an unwillingness to take on the responsibilities of public governments. In some Aboriginal and other community agencies with limited resources, service providers are "frustrated dealing with people (elders/seniors) who won't respond and won't take action to defend themselves."

Municipal governments throughout the NWT have a mandate for recreation. Like some communities, the Town of Fort Smith includes programming for elders/seniors in order to reduce isolation and vulnerability to abuse. Most other NWT municipalities target recreation programs at youth.

Working Together to Prevent and Respond to Elder Abuse

Service Providers and Policy Makers Said...

In all communities participating in this research, responding to abuse of older adults is seen primarily as a legal issue that is the responsibility of the RCMP, victim services, and/or community justice. To this end, most service providers involve the RCMP and work with them to the extent that their mandates and capacity allow, and victims are prepared to disclose abuse and pursue a complaint.

Service providers and policy makers agreed that everyone shares responsibility to create awareness about abuse of older adults. They said that efforts to prevent and respond to abuse are made easier when all the organizations with a role to play in the safety and well-being of community members:

- meet frequently,
- share a mutual understanding or definition of abuse of older adults, and
- know what each organization can and does do to intervene in cases of abuse.

In some communities, formal and/or informal interagency/networking is effective but may not include elders/seniors groups or the faith community which is often a main support for older adults. In other communities, interagency work flounders due to lack of capacity - i.e. a coordinator - to bring players together and follow-up on committee work.

Many of the working relationships between agencies on matters of abuse of older adults are based on referrals. For instance, local housing organizations may work with income assistance and social services staff regarding tenancy matters, and community justice, victim services, and the RCMP may work together to support victims. Caseload information is often shared between homecare and community health staff, the Public Guardian, and the RCMP. In Yellowknife, the Yellowknife Interagency Family Violence Protocol Committee has developed protocols among several front-line agencies to improve responses to family violence. The protocols have clarified responsibilities, strengthened relationships, and improved responses to family violence. Protocols have addressed such issues as referrals, confidentiality, and follow-up that are often stumbling blocks to interagency or other collaborative endeavours to address violence and abuse.

Project partnerships are a common way that non-government, Aboriginal, and government agencies work together. Unfortunately, project efforts are usually short lived due to limited and/or short-term funding. Partnerships/other relationships may not extend beyond the duration of any particular project.

Several service providers and policy makers spoke to the need for more integrated and collaborative efforts. For example, the Inuvialuit Settlement Region, recent research (March 2010) was cited for its recommendation for "partnerships with RCMP in the

development of prevention strategies to combat elder abuse (and) work with justice to educate elders and family members on such things as protection orders" (p. 12).

Working Within a Family Violence Framework

Service Providers and Policy Makers Said...

In other jurisdictions, abuse of older adults and family violence frameworks are often separate. In the NWT, abuse of older adults is addressed within the larger frame of family violence due to relatively small populations, overlap in services/supports, and the limited number of supports available in many communities. For example, the current *NWT Family Violence Action Plan Phase II* does not target specific age groups but endeavours to expand and enhance the range of services for all people experiencing violence and abuse.

There are mixed opinions about the appropriateness of continuing to deal with abuse of older adults within the broader family violence framework. Some service providers and policy makers contended that it gets lost within the family violence framework. These

individuals said that abuse of older adults should be a standalone issue in order to give it the priority that is needed. They said that mandatory reporting, legislation, and/or a distinct program initiative would support this priority. Other service providers and policy makers suggested that locating abuse of older adults within the family violence framework is appropriate because "the networks are all there" and most abuse is perpetrated by family members. These agencies said

"The prevention of and response to elder abuse is very specialized. Service providers must be well versed with working with elders."

that it is not a problem of framework but a problem of priority. They said that abuse of older adults should be more clearly defined, responsibilities for responding to and preventing abuse should be made clear, and specific resources should be allocated to it. They recommended more focus on distinct and separate approaches that respond to the unique needs and circumstances of elders/seniors including the needs of older men who experience abuse.

4.3 Best/Promising Practices and Lessons Learned

The Literature Said ...

Information on best practices and promising approaches to preventing and responding to elder abuse in remote northern locations in Nunavut, Nunavik, Yukon, and Nunatsiavut is limited. Some information is available on family violence programs and services from these jurisdictions and listed in the Nuluaq Project searchable database (see Appendix D). Unfortunately, there is no evidence that the programs, services, models, and approaches included in the Nuluaq Project database have been evaluated.

Two recent research projects documented promising approaches for addressing abuse of older adults in Canada¹³ in the NWT.¹⁴ These, and other selected documents are main sources for the following summary.

Outlook 2007 identified promising approaches that can work anywhere in Canada. A short list of approaches and considerations that may be relevant to the NWT includes:

- General guidelines related to cross-cultural work and preservation of traditional practices are documented in the National Inuit Strategy.¹⁵
- A "holistically balanced home and community life" is important to preventing abuse of older adults.
- To be effective in Aboriginal communities, abuse prevention programs should:
 - o use a strengthening family and culture approach;
 - be developed and offered within the context of the family;
 - o contribute to capacity building (increase social capital) in communities;
 - o use Aboriginal traditional healing approaches;
 - o raise awareness of the issue through public campaigns; and
 - o use community knowledge.

¹³ Outlook 2007: Promising Approaches in the Prevention of Abuse and Neglect of Older Adults in Community Settings in Canada (2007). Promising Approaches for Addressing/ Preventing Abuse of Older Adults in First Nations Communities: A Critical Analysis and Environmental Scan of Tools and Approaches (2009).

¹⁴ Best Practices for Stopping Abuse of Older Adults in the NWT (2005).

¹⁵ http://www.pauktuutit.ca/pdf/publications/abuse/InuitStrategy_e.pdf

- Comprehensive strategies and networks need to address abuse of older adults at all levels of prevention (e.g. raising community awareness, empowering elders/seniors to develop support groups and peer networks, and developing linkages among community services).
- Raising awareness of abuse of older adults, the ongoing documentation of projects and programs, and adequate resources are key to successful initiatives.
- Wider use of best practices for multi-cultural engagement is helpful to involving older adults in abuse prevention efforts.
- Training of front-line workers is needed to recognize abuse, the dynamics of abuse, and know procedures to follow when abuse is suspected or detected.
- It is important to work from principles that are visible and can be reviewed when activities are evaluated.
- Dedicated, substantial, and sustained resources are important to making progress on stopping abuse. In Ontario, \$4.3 million was dedicated to the strategy over five years. The Ontario strategy focuses on coordination of community services, training for front-line staff, public education to raise awareness, and locating consultants in six regions. In Manitoba, the strategy provides resources for a consultant, a seniors' abuse referral line, community/regional response teams, education and awareness, and funded partnerships with key senior serving organizations that provide direct services.
- Coordinated community response helps to increase the capacity of groups and communities to prevent abuse of older adults. Coordinated approaches vary but include:
 - o interdisciplinary teams of professionals with a focus on complex cases;
 - interagency coordination of mandated services to share information on methods, resources, and referrals and share responsibility for short term projects and events; and
 - whole community coordination of anyone with an interest in preventing abuse to create awareness, track trends, identify gaps and enhance existing resources/services.
- Dedicated services help such as:
 - dedicated workers in organizations that deal with older adult abuse issues; and

- o centres specializing in elders'/seniors' issues such as the Advocacy Centre for the Elderly in Toronto.
- Annual promotion of World Elder Abuse Awareness Day offers opportunities to create awareness.

Outlook 2007 also identified promising approaches associated with various types of activities.

Education and Awareness (Public Sensitization Programs) examples include:

- public education that involves many levels and/or delivery styles for different audiences, delivered in a way that reduces attitudes of discrimination against people on the basis of age (e.g., ageist attitudes).
- theatre that uses non-verbal and other messages to engage multi-cultural and Aboriginal audiences.
- carefully crafted social marketing campaigns that deliver positive and high impact messages.

Educating Professionals, for example:

The Ontario Network for the Prevention of Elder Abuse (ONPEA) is dedicated to educating professionals about abuse of older adults.

Older Adult Sensitive Programs that:

- modify projects, services, and products so they make sense to elders/ seniors.
- are sensitive to all cultures.
- provide information in multiple formats, much of which is <u>not</u> internet-based.
- research and develop models for how best to support abused older women. For example, the BC Yukon Society of Transition Houses delivered a pilot project sensitive to older women.

Grass Roots Organizations and Projects that:

- produce guiding principles for community-based initiatives that promote local involvement and ownership. The British Columbia Association of Community Response Networks (CRNs) adopted a community development approach. The CRN Toolkit provides guidance and approaches for community building activities.¹⁶
- offer peer programs that are sensitive in approach and engagement. For example, the Guelph – Wellington Seniors Association in Ontario operates a seniors' peer support telephone program that encourages older adults to tell their stories, reach out for assistance, and help them to find solutions.

Collaborative Programs that:

• bring individuals and groups together. They may dedicate a community development position to assist/facilitate partnerships, 'whole' community approaches, and stronger relationships amongst professionals.

Promising Approaches for Addressing/ Preventing Abuse of Older Adults in First Nations Communities: A Critical Analysis and Environmental Scan of Tools and Approaches (2009) identified the following examples of approaches that might help to prevent and respond to abuse in the NWT.

- Root activities in principles that foster balanced and equitable relationships, for example:
 - o respect, responsibility, reciprocity, and relevance;
 - o elder knowledge to guide behaviours;
 - o whole community / whole family / intergenerational approaches; and
 - o using resources from, in and outside First Nations/Aboriginal communities.
- Develop and implement a culturally appropriate response and prevention strategy with implementation tools, guidelines, and supports to help First Nation and Inuit communities address abuse. In 2006, Pauktuutit developed a national

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¹⁶ http://www.bccrns.ca/resources/crn_toolkit/index.php

- strategy, guidelines, and tools to prevent family violence and abuse in Inuit communities.¹⁷
- Professionals who interact with older adults should work together to be more
 effective and creative in their responses. Coordination of multiple services is
 critical for responding to complex cases.
- Form networks of practitioners (e.g. police, researchers, front-line health and social service workers and others) to improve coordination, profile, research, and planning to address abuse. The International (INPEA) and Canadian Networks for the Prevention of Elder (CNPEA) are examples of such networks.
- A safe, non-threatening environment is needed to foster relationships and dialogue between front-line workers and older adults. Relationship building takes time and may require a worker to disclose personal information.
- Where outside resources are needed to supplement missing community services
 or to respond to a complex situation, the outside worker should devote time to
 building a relationship with a credible contact person within the community.
 Once the relationship has been established the contact person can then introduce
 the outside worker to other community workers, leaders, and elders/seniors.

The 2009 research into promising approaches on abuse of older adults in First Nation communities identified considerations for interventions at the individual, family, community, and societal levels.

- <u>Individual Level Interventions</u> are geared to interpersonal approaches, relationship building, and adoption of a mix of traditional and mainstream approaches. Counselling techniques that give choices of Western and traditional/cultural therapies suitable for the individual and the use of narrative therapy are viewed as most effective.
- <u>Family Level Interventions</u> tend to:
 - o involve a multi-disciplinary team, lead by an individual who knows the older adult best;

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¹⁷ http://www.pauktuutit.ca/pdf/publications/abuse/InuitStrategy e.pdf

- o focus on the 'whole family' including the abuser, however 'whole family' is defined by the older adult; and
- be intergenerational to promote understanding and involvement of youth and other family members.

Family conferencing is an intervention often used to engage the whole family in addressing serious and sensitive issues. *Islands of Safety*¹⁸ is a response based family counselling model developed for use with First Nations families that encounter violence. This model is based on the understanding that people prefer respect, seek to preserve their own dignity, and resist violence. The model relies heavily on the use of language that avoids blaming the victim and excusing the perpetrator. Response based practice improves the safety of victims and facilitates the development of safety plans that work.

- <u>Community Level Interventions</u> tend to build on existing initiatives or launch new activities that specifically target older adults. Examples are:
 - o developing programs with an abuse awareness message.
 - o using existing domestic or family violence programming as a basis for addressing abuse of older adults.
 - o involving local leadership in awareness/education activities.
 - o using existing community justice circles to address abuse of older adults.
 - o adding prevention of abuse in community health and social service plans.
 - o exchanging information on effective community approaches.
 - professional development for front-line workers using approaches and situations typical of mainstream and Aboriginal societies.

¹⁸ Islands of Safety: A Safety Planning Model for Urban Aboriginal and Metis Families in Cases of Violence. (2009.)

There are several examples of community level interventions identified in the 2009 promising approaches report.

- o In 2010, the British Columbia Association of Aboriginal Friendship Centers was funded to help reduce the incidence of abuse in their communities through an awareness campaign and education materials/tools targeting Aboriginal people. The 'Honouring our Elders' Elder Abuse Awareness and Prevention program provides funding to Aboriginal friendship centres throughout BC to coordinate and prepare community action plans to address abuse.
- O Community Response Networks (CRNs) are local networks in many Canadian communities which take coordinated approaches to older adult abuse. Community development principles specifically inclusion, meaningful participation, power-sharing, and capacity building tend to be inherent in these local networks.
- O Community protocols support CRNs. Protocols tend to include: what CRN members will do if they encounter someone needing help; when and how referrals will be made; when and how to involve the police; followup after a referral is made; involving trusted people; and obtaining, recording, and disclosing information.
- Interagency protocols such as the Nuu-Chah-Nulth Protocols for Intervention provide direction to local front-line workers for responding to cases of abuse.
- The Vancouver Coastal Health First Nation has developed an on-line resource to help people to take action on elder abuse. 19 The manual provides information on how to recognize and report abuse and resources (e.g. clinical assessment tools, practice guidelines, and community services). The manual also includes training materials on building community capacity and a possible vision for, and role of community response networks (CRNs) in First Nations communities. The training manual targets community health and social service workers, community members, CRN members, and Vancouver Coastal Health workers including those responsible for BC's Adult Guardianship legislation.

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¹⁹ http://vchreact.ca/

- <u>Societal Level Interventions</u> may be territorial, provincial, national or global in scope. Examples are:
 - o The National Strategy to Prevent Abuse in Inuit Communities is based on information collected for the Nuluaq Project.²⁰ The Strategy recommends the use of Inuit healers and healing principles and adoption of guidelines for community mobilization provided by Pauktuutit Women's Association of Canada. The Strategy suggests approaches that:
 - work from explicit and espoused principles.
 - follow guidelines for cross-cultural interaction and preservation of traditional practices.
 - raise awareness of abuse and neglect of older adults.
 - document project/program activities and best practices for multi-cultural engagement.
 - are adequately resourced.
 - train front-line workers to recognize abuse, the dynamics of abuse, and procedures to follow when abuse is suspected or detected.
 - The \$13 million federal elder abuse initiative was launched in 2009. It includes a national awareness campaign as well as measures by a number of federal departments and agencies whose programs and activities reach out to elders/seniors and those who work with them. Contribution funding was also available to help non-profit organizations develop national, provincial/territorial, or regional awareness activities for seniors, their families, and service providers in order to help prevent abuse. In 2009 and 2010, awareness and professional development projects were funded.
 - World Elder Abuse Awareness Day (June 15) is an opportunity for countries and communities around the world to take action and raise awareness of this important human rights issue at all levels.
 - Legislation, although intrusive, may be used in some jurisdictions (e.g. Nova Scotia) to protect and enhance the safety of older adults.

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²⁰ http://www.pauktuutit.ca/pdf/publications/abuse/InuitStrategy_e.pdf

Best practices research completed in the NWT in 2005 recommended focusing resources on:

- empowering older adults to organize and take greater ownership of solutions for stopping abuse in the NWT.
- building community and territorial networks that enable older adults and the front-line workers and organizations that serve them, to develop and share information, tools, approaches, and research.
- research to support education and advocacy efforts that debunk misconceptions about abuse of older adults and help older adults identify and name it.
- building community capacity that promotes stronger, collaborative relationships among community agencies, volunteers, and leadership, and assists consultation and intervention teams to form and be sustained in their efforts to address abuse of older adults.
- developing familiar and culturally and linguistically appropriate public education and awareness resources for use in campaigns to promote zero tolerance of older adult abuse.
- piloting and evaluating proven community development approaches for responding to abuse of older adults such as a family support centre/ safe home network and older adult outreach programs in smaller NWT communities.
- increasing the pool of community resources to eliminate service gaps for victims of abuse (e.g. victim service workers, older adult outreach personnel, and peer advocate/counsellors) and those at risk of abuse due to transportation issues or lack of regular socialization and recreation program opportunities.
- responding to community requests for information workshops, forums, and presentations to raise awareness and stimulate discussion about abuse of older adults.
- recruiting and training local gatekeepers and volunteers committed to addressing abuse of older adults.

Lessons learned from best practices and promising approaches documentation have served as the basis for the development of tools to assist governments, communities, and organizations at all levels to prevent abuse of older adults. To clarify responsibilities, the National Seniors Council developed the following checklist.²¹

Checklist for Preventing Abuse of Older Adults		Responsibility
✓	Coordinated interventions at all levels.	Government
✓	Legislation to define abuse and jurisdictional responsibility.	Government
√	Mandatory reporting when older adults are at risk.	Government
✓ ✓	Enhanced public awareness identifying signs and resources. Public awareness campaigns including those targeted at people who have regular contact with elders/seniors.	Community
✓	Local media awareness and involvement. Neighbourhood watch programs for elders/seniors.	
✓ ✓	Regional planning and integration of services. Regional planning groups that reflect the cultural make-up of the target population. Identification of service gaps and coordination of potential stakeholders to address service gaps.	Community
√	Solutions to address conditions contributing to abuse (e.g., isolation, addictions, illiteracy, poor transportation, poverty, and unemployment).	Community
✓	Efforts to reach out to particular populations at risk of abuse due to cultural or language barriers.	Community
✓	Ethical and legal standards related to abuse of older adults.	Organization
√	Identification of lead agencies responsible for coordinating abuse prevention and treatment efforts.	Organization
✓	Coordinated and well-subscribed elders/seniors educational and provider support programs. Documenting and sharing innovative 'best practices' with	Organization
✓	others. Clear policies and procedures for handling cases of suspected or confirmed abuse.	Organization

²¹ National Seniors Council (2007). Report of the National Seniors Council on Elder Abuse

Older Adults Surveyed Said...

Older adults in the NWT were asked what works best to deal with abuse of older adults. Many older adults surveyed checked all the options provided. Generally, the priority given to actions that work best to deal with abuse did not vary between older men and older women and among older adults living in Yellowknife and other research communities. As shown in Figure 4, most often awareness (78%), speaking out (76%), support groups/buddy system (71%), help from social/homecare workers (71%), support from family members (69%), and elders/seniors being active (68%) were identified as actions that work best.

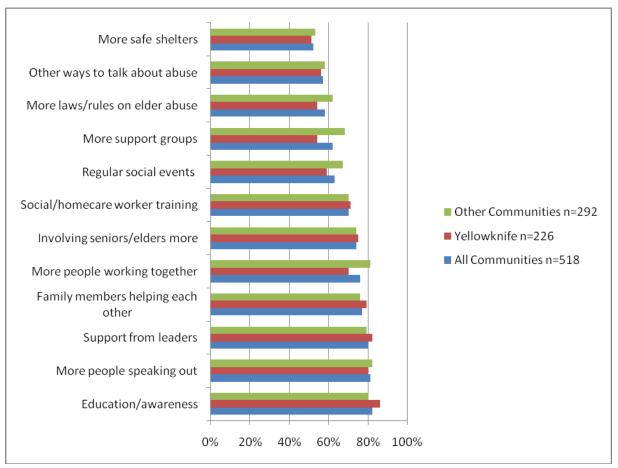
(n=511)Being active Family support Social/homecare worker support Support groups/buddys People speaking out Awareness of abuse 0% 10% 20% 30% 40% 50% 60% 70% 80%

Figure 4: Older Adult Perceptions of What Works Best to Deal with Elder Abuse

Several older adults surveyed stressed the importance of consistent supports, informal supports, the availability of services/supports/information in the Aboriginal languages, and the involvement of community leaders and the faith community.

"There needs to be someone they (elders/seniors) can call who is not within the 'system'." Older adults surveyed also identified what would help communities to deal with abuse. Consistent with their views about what works best to deal with abuse, they said that education and awareness about abuse (82%), more people speaking out (81%), and leadership support (80%) would help NWT communities to deal with abuse of older adults (Figure 5). These suggestions did not vary significantly among older adults in Yellowknife and other research communities. However, older adults in research communities outside of Yellowknife more often suggested more support groups and regular social events than older adults in Yellowknife. This may be due to fewer support groups and social events in smaller communities. Older adults surveyed in communities outside Yellowknife were also more likely to suggest more laws/rules on elder abuse and more people working together than older adults living in Yellowknife.

Figure 5: Things That Would Help NWT Communities, Yellowknife and Other Research Communities Deal with Elder Abuse

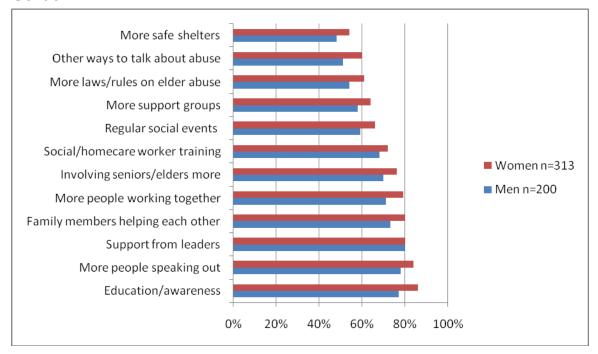


Older women and men surveyed agreed that support from leaders would help communities deal with elder abuse. Compared to older men, older women more often suggested a broader range of collaborative efforts and laws to address elder abuse in their communities (Figure 6). In addition to suggestions listed in Figure 6, older men and women also suggested making sure that all elders/seniors have access to a telephone, dealing with substance abuse and addiction issues, better care for homeless people, revision of current public housing policies, 24/7 care for elders/seniors in the community,

"We need "people doing things rather than just talking about it." We need "a variety of opportunities for people to open up in informal ways." We "need to confront rather than running away."

on-the land youth-elder programs, and better enforcement of existing laws.

Figure 6: Things That Would Help Communities Deal with Abuse of Older Adults by Gender



When asked to identify activities, programs, or groups that do or have done a good job of dealing with abuse, older adults surveyed had little to say. The few suggestions offered tended to relate to home visits and homecare workers, social activities that bring elders/seniors together, education and awareness, and helping people take action. These suggestions were summarized by two older adults as "any groups that get elders together, out of their homes to socialize get

"Support from leaders may be problematic in some communities as the leaders themselves may be abused or be abusers"

encouragement," and "any social activities that help to form networks and connections especially for those living alone."

Older adults surveyed identified some organizations that do a good job of dealing with abuse of older adults. Most often these groups are senior oriented such as the Inuvik Elder Day Program, the Yellowknife Seniors' Society or the Baker Centre in Yellowknife, and the NWT Seniors' Society. Some friendship centres and churches were also identified as doing a good job.

Service Providers and Policy Makers Said...

Service providers and policy makers had mixed views when involved." queried about what actions have worked best in their community/region to prevent/respond to abuse of older adults. While they agreed that the RCMP and the courts are not a solution, they had some difficulty agreeing on actions that have/do

work best. Service providers and policy makers suggested that a variety of actions are needed to prevent and respond to abuse. The actions identified by service providers and policy makers were similar to those identified by older adults surveyed (see Figures 4 and 5).

• Regular or daily elders/seniors social activities rather than occasional gatherings, such as luncheons, exercise groups (e.g. Elders in Motion), and the Inuvik Elders' Day Program have worked

"The Elder Day Program helps to overcome loneliness."

"The Baker Community Centre has a lot of activities for seniors to get out and get involved."

"The NWT Seniors' Society has done a good job in educating the public. This survey will help draw attention to the issue."

to make elders/seniors more visible in the community. Regular social activities support the use of the Aboriginal language and cultural practices and keep elders/seniors active, well-fed, and connected to each other. Regular social activities are also a way for elders/seniors to connect to services and to diminish vulnerability to abuse. Staff at the Inuvik long-term care said that without the Elders' Day Program "there would be more demand on long-term care for respite from abuse." The success of regular programming in Inuvik has inspired the recent start-up of a one-day a week elders' program in Aklavik. The Inuvik Elders' Day Program is also a reason that elders/seniors from other Beaufort-Delta communities come to Inuvik to stay with friends and family, "just so they can attend the Day Program."

- Buddy systems where elders team up with peers or a younger community member for support have had some success in keeping elders/seniors safe in Tuktoyaktuk and some other NWT communities, particularly in cases of an emergency.
- Intense and sustained information and awareness campaigns where people recognize themselves (e.g. in TV ads and posters) help elders/seniors and others to recognize abuse. Some service providers/policy makers identified a series of TV ads produced by the NWT Seniors' Society some years ago as an example of an effective awareness campaign. Others identified residential school healing activities, seniors' week, family violence awareness week, and addictions awareness week as examples of successful awareness campaigns that could be sustained throughout the year and include messages about abuse of older adults.
- Outreach/home visits, one-on-one dialogue, and personal invitations to group sessions are ways that elders/seniors can personally connect with each other and front-line workers can build relationships with them. Positive personal relationships encourage elders/seniors to tell their stories and learn to recognize and protect themselves from abuse. In the past, certain individuals were known to informally take on this responsibility in the community while in other communities, it was the Chief or another leader who took responsibility for visiting and checking-up with elders/seniors.
- Continuity and commitment of front-line workers particularly homecare workers, keep the most vulnerable safe from abuse because these workers have

well-established relationships with elders/seniors, are more likely to recognize abuse, and are more willing to use whatever authority they have to intervene in abusive situations.

- Family meetings/conferences/interventions extended over a period of time (rather than one-time only events) work well to strengthen family relationships, identify responsibilities for the safe care of elders/seniors, and address safety and security issues. These meetings can identify family members who can be trusted to do various caretaking jobs and when and how to bring in outside resources such as the Public Guardian.
- Active and inclusive elders/seniors groups that respond to the varied needs of older adults and advocate on their behalf diminish vulnerability to abuse. Elders/seniors groups/committees work best if they are supported (e.g. have staff) and are focused on issues and social activities that engage and are meaningful to all elders/seniors in the community. For example, budgeting is a way to intervene in financial abuse so elders/seniors know how much money they have to give away (if they choose to do so).
- Activities that bring elders and youth together on the land and in the
 community foster positive, healthy relationships. Elder-youth activities create
 opportunities for both groups to learn from and develop respect for each other.
 Some NWT communities have created elder-youth coordinator positions or
 expanded the work of local justice coordinators to bridge the gap between youth
 and elders. Other communities actively and regularly engage elders/seniors in
 key community groups that may involve youth such as justice committee.

Service providers and policy makers were clear that actions that have/do work to address abuse of older adults should be grass-roots in nature and owned by community

members rather than by service providers. Some noted however that "this does not happen very often because mostly people are reluctant to get involved." Service providers and policy makers tended to agree that initiatives that they might lead should use focused interagency approaches in order to make best use of resources and give priority to this issue. Interagency and

Family based practice works "because they (families) are the centre of an elder's world".

community-driven actions to address abuse of older adults are supported by good facilities like long-term care that do community programming and offer short-term respite.

Bringing older adults into care and controlling their financial resources (e.g. through power of attorney, trusteeship, direct deposit of pension cheques, purchasing limits, food vouchers, or weekly allowances) were advocated by some service providers as effective ways to respond to and prevent abuse. Other service providers are clear that elders/seniors should not have to give up their rights and independence to be safe. Elders/seniors don't want to leave their families.

In some communities rather than identifying actions that do or did work to address abuse, service providers talked about what could or would work. For example, in Tuktoyaktuk, actions that could work included: a buddy system that is facilitated and supported; family relationship building projects; regular elders/seniors gatherings; a functional and active elders' committee; education that shifts thinking away from blaming elders/seniors for not taking action to what people can do to help; leadership priority to elder/senior involvement in meaningful ways; and better use of existing resources in the community.

In Hay River, it was suggested that the Hay River Seniors' Society could form a community justice committee to hear cases that impact them or Society members could be victim advocates in circle conferencing. By being involved in this process, elders/seniors would be able to prescribe/advocate for actions that meet the needs of elders/seniors (e.g., grass cutting, snow shovelling).

Lessons from Past/Current Efforts to Prevent/Respond to Abuse

Service Providers and Policy Makers Said...

Service providers and policy makers offered few lessons from past/current efforts to prevent and respond to abuse of older adults. Some suggested that the work to stop violence against "Seniors will not come forward without a safety net". women should be replicated to address abuse of older adults because there is much to be learned from these experiences.

Service providers and policy makers agreed that there is no 'quick fix' to abuse of older adults but immediate responses and longer term solutions are needed. The main ingredients of successful responses were identified as:

- *Trust*: elders/seniors will talk one-on-one with people they trust, and people they trust to respond in positive, helpful ways (rather than simply referring them to someone else).
- Consistent and regular: elders/seniors need to be regularly and consistently engaged in community and family activities. Information and awareness campaigns and service/program responses need to be consistent and regular. Projects have to run regularly/daily and have consistent staff (so that trusting relationships can be established).
- Respectful engagement: every opportunity should be taken to meaningfully engage elders/ seniors in the community and value and respect their contributions politically, socially, and culturally.
- *Understanding:* older adults and the general public need to be able to name/ identify abuse in order to prevent and respond to it. "Talking about elder abuse is still taboo." Educating young people and older adults together is a good way to improve understanding of abuse of older adults as well as provide much needed understanding about the aging process and chronic/ degenerative diseases such as dementia.
- *Positive relationships*: elders/ seniors need relationships with people who are patient and respectful. Families need to have opportunities to learn how to respect the rights and needs of all members.
- *Known successes:* older adults will come forward if they are aware of peers who have been successful in dealing with abuse.
- Aboriginal and English language use: information and awareness activities as well
 as programs and services need to consistently use both Aboriginal and English
 languages.

- *Community based*: programs and supports developed by and embedded in the community and reflect local and culture practices work best.
- *Proactive and visible:* front-line workers who are visible and active in the community can be role models. For example, the RCMP in Hay River have attended elders breakfasts at the Soaring Eagle Friendship Centre, participated in information sessions with the Hay River Seniors' Society, and sponsored family days to meet and show community members the detachment and its operations.
- Positive responses: medical and legal interventions don't necessarily respond to
 the needs of all elders/seniors experiencing abuse. Other tools and approaches
 are needed to enable front-line workers to understand and respond to older
 adults experiencing abuse. A response-based practice needs to be more widely
 used.
- *Cohesive*: service providers need to work more closely with others to ensure that all available supports/services are used to prevent and respond to abuse. In many communities, services to prevent and respond to abuse are fragmented. For example, in Fort McPherson there are lots of local resources and local people in helping roles but inadequate leadership or mechanisms to bring people together to address issues.

Reverence for elders is commonly understood as a central value of Aboriginal cultures in the NWT. It is difficult for front-line workers especially those new to the north, to

come to terms with the lack of respect often shown to older adults. The lesson for some service providers is that the issue of elder abuse has to be confronted 'head on' so northerners take notice and action in legislation, significant policy change, or guidelines to support front-line workers and others to prevent and respond to abuse of older adults. Some front-line admitted that adult protection legislation may not be the best route but "like child protection, it would at least get seniors into a safe

place."

One worker talking about working with elders/seniors for a few years said: "I am still reeling from how little family members care (about elders)."

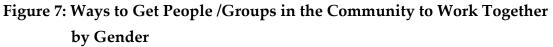
In some communities, there is the view that local elders'/seniors' committees/groups are a main vehicle for preventing and responding to abuse. The Yellowknife Seniors'

Society and the Fort Smith Senior Citizens' Society are two groups who work to engage elders/seniors and work with front-line workers. Not all NWT communities have active elders/seniors committees. For instance, the Inuvik Community Corporation has disbanded its elders committee while in Tutoyaktuk, the elders committee does not lead activities for community elders/seniors. In Fort McPherson, some efforts are being made to revitalize the elders' committee. Service providers noted that difficulty securing adequate resources to stage regular social activities or to hire staff/coordinators are main problems confronting elders/seniors groups.

4.4 Thoughts on Networks to Prevent and Respond to Abuse of Older Adults

Older Adults Surveyed Said...

Older adults surveyed said that the best way to get people/groups in their community to work together to prevent and respond to abuse of older adults is to do home visits (78%), have training workshops (74%), form elders/seniors groups (73%), and schedule regular social events (65%). (Figure 7) Fewer elders/seniors suggested telephone conferences (20%) or internet chat groups (16%) as ways to get people to work together. Regular social events and home visits are more popular with older women than older men. Older adults in Yellowknife said that home visits (79%) and elders/seniors groups (75%) are the best way to get people/groups in the community to work together on abuse of older adults (Figure 8). In other research communities, training workshops (78%) and home visits (77%) were most often identified as the best way to get people to work together.



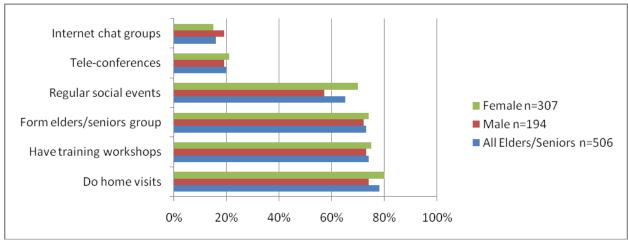
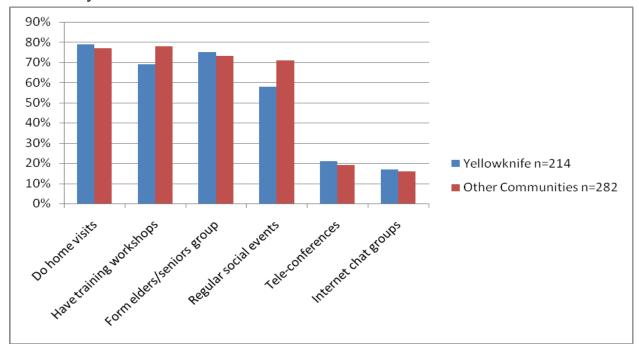


Figure 8: Ways to Get People /Groups in the Community to Work Together by Yellowknife and Other Research Communities



Older adults surveyed offered other suggestions for getting people/groups in their community to work together on abuse. These suggestions focused on education, information sharing and communication around the issue in NWT communities. Other suggestions included a peer outreach worker, an elders/seniors advocate, buddy

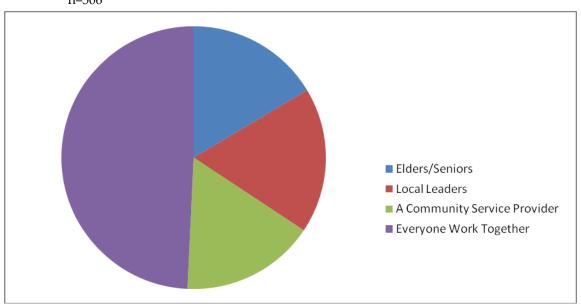
systems with front-line workers or peers, regular workshops done in the languages of the community, regular monthly meetings, and front-line worker and community training about aging, dementia, and financial management.

"It is important to have service providers be intentional about dealing with elder abuse. They need clear guidelines."

Whether male or female, living in Yellowknife or in another research community, overwhelmingly older adults surveyed

said that everyone should work together on elder abuse (66%) rather than having local leaders (24%), community service providers (22%) or elders/seniors (22%) take charge of this work (Figure 9). Several older adults noted that an interagency approach is needed to facilitate people working together. Others suggested that the faith community should get more involved in elder abuse issues.

Figure 9: Who Should Be in Charge of Getting People/Groups to Work Together?



Older adults surveyed expressed their willingness to help deal with abuse in their community. Most often older adults said they would volunteer as needed (63%), attend meetings/events (57%), or speak out about abuse (52%). Fewer older adults would coordinate activities (32%), be a champion/spokesperson (25%), or start a group (22%). Fewer (17%) still said that they didn't know how to help deal with abuse in their community and 5% said that they would do nothing (Figure 10). Overall,

"Everyone should work together but there should be an agency in charge or I don't think anything will get done."

older adults in communities outside Yellowknife expressed a greater willingness to help to deal with abuse.

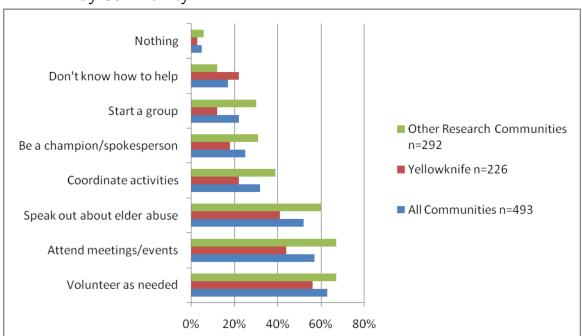


Figure 10: Ways Older Adults Would be Willing to Help Deal With Elder Abuse by Community

Older adults surveyed suggested other ways that they would be willing to help deal with abuse in their community. These suggestions included "learning more to be able to do more," showing videos because many elders/seniors don't read, and talking about

abuse in the past, and in the present, as a conduit for encouraging more older adults to talk about abuse in their home and community.

Service Providers and Policy Makers Said ...

Front-line workers in the research communities have mixed ideas about abuse networks. They agreed with older adults that people have to work together to prevent and respond to abuse of older adults. Service providers and policy makers said that effective networks to prevent and respond to abuse could have many faces. They could be:

- **family networks** that confront long histories of abuse. Service providers admit that these networks will be challenging to build and sustain due to the depth of social issues in some families. They suggested that building on family conferences is a way to strengthen family based approaches to addressing abuse.
- inclusive, representative, and well supported elders/seniors groups that take leadership to regularly bring elders/seniors together with key front-line people such as homecare, community health representatives (CHRs), and RCMP to share information to identify abuse and actions to take if people encounter or suspect it.
- **peer support and information groups** that are facilitated by community wellness or other front-line workers and link elders/seniors to local helping agencies.
- advocates who work with teams/networks of elders/seniors to spearhead information/awareness and advocacy campaigns that encourage older adults and others to speak out on abuse, and function as a single entry point to a network of supports that encourage positive responses to elder abuse and non-judgmental, safe investigation processes.
- elder-based interagency groups that take an interdisciplinary and collaborative approach to sharing responsibility, building strong interagency relationships and communications, talking about elder abuse in ways that keeps it on the "front-burner," and linking to programs that are working to address abuse of older adults. Members could include representatives of groups that work with elders/seniors such as housing, RCMP, social, medical and homecare workers,

elders'/seniors' groups, local governments, friendship centre, churches, stores, and banks.

- multi-party working groups or committees of front-line workers and elders/seniors who could lead specific elder abuse projects such as information/ education and social and cultural activities. Committees could partner with local schools to involve students working on their CALM hours or other school assignments, or with local justice committees to increase opportunities to bridge gaps between elders and youth.
- **front-line service groups** made up of front-line workers including homecare workers, who are trained to use good tools to assess the risk of elder abuse and link elder/senior supports/services.
- **volunteer groups** with a coordinator to organize and train volunteers to regularly liaise/network with elders/seniors throughout the community.
- **electronic information sharing** via email, Facebook, or through a northern elder abuse website that is also linked to existing websites.
- **electronic case management** to facilitate file sharing and web conferencing among service providers.
- a network of inter-related community-based workshops/gatherings/town hall meetings on elder abuse including efforts that show "appreciation for seniors."

The interagency approach to networking is most familiar to NWT communities. Several service providers and policy makers drew from the past experiences of interagency efforts to recommend building on existing networks, groups, or committees rather than starting new groups. They also said that it is critical to engage community members to ensure local ownership of the issue and the network's activities. Effective interagency efforts in the past have been supported by a paid coordinator to ensure that there is capacity to follow-up and bring people together. Information and awareness campaigns and immediate, local solutions about how best to support elders/seniors should be priorities of local networks/interagency groups.

Issues Potentially Impacting Networks to Prevent and Respond to Abuse of Older Adults

Service Providers and Policy Makers Said ...

Lack of clear ownership and responsibility for addressing abuse of older adults could impact networks to prevent and respond to abuse of older adults in the NWT. At the moment, there is no ownership of the issue within government and arguably among older adults. Lack of ownership and responsibility for this issue likely contributes to difficulties experienced by the NWT Seniors' Society and others to get traction on the issue and engaging older adults.

Service providers and policy makers agreed with older adults that lack of awareness of elder abuse is a significant issue that could thwart networks. Further, without statistical and documented anecdotal evidence, it is difficult to make the case for abuse networks and solicit necessary support from community members and governments.

Capacity issues could also impact the effective functioning of networks. Given current workloads, few front-line workers would be able to take on additional responsibilities or focus time and resources on an issue that is not part of their mandate. Further, frequent turn-over of front-line staff, prolonged position vacancies, and lack of exposure to and appropriate professional development/training to respond to abuse of older adults could limit the extent to which front-line workers could participate in networks. Other capacity issues that could impact networks are volunteer burn-out and the need for funding. In particular, precedents have been set where most meetings involving elders/seniors require payment of honoraria or other incentives. Funding opportunities to support participation, network coordination, and front-line training may be limited.

Service providers and policy makers identified other issues that could potentially impact the development and sustainability of networks to prevent and respond to abuse of older adults:

- attitudinal issues could have an impact on a network, particularly if local leadership and key agencies don't recognize and name abuse for what it is rather than "pointing fingers (at the victim) and defending the abuser."
- pressure on local leaders can stymie action and undermine efforts to develop and sustain networks. For example, the leadership in one community has lobbied the RCMP to arrest bootleggers and has recommended a petition limiting or prohibiting alcohol in the community. Due to the influence of bootleggers in that community, the efforts of local leaders tend to be subject to constant criticism and actions are stymied.
- municipalities indirectly sanction gambling. In one community, the hall is open
 most nights for cards games which usually involve gambling and older adults.
 This opens the door to financial abuse and sends the wrong message to residents
 and local agencies trying to address abuse. Lack of municipal support could
 negatively impact networks.
- bureaucratic 'red tape' within community service agencies along with staff turnover impacts on appropriate responses to elder abuse and could influence participation in networks.
- confidentiality/the release of information could impact on networks to prevent and respond to elder abuse given that there is little/no obligation to report abuse.
- language and literacy could limit communications and participation in networks.
- the 'small community syndrome' where histories of "family feuding" and infighting within families or agencies could impact on participation in networks to prevent and respond to abuse of older adults.

Overcoming potential barriers is challenging but service providers and policy makers agreed that every community has resources or ways to prevent and respond to abuse of older adults. To identify and employ these resources, service providers and policy makers said that awareness and public education should be a priority of networks.

They agreed that public education campaigns need to take innovative approaches, use Aboriginal languages as well as English, describe abuse in new ways, and employ many different media and venues to "get it (elder abuse) out there and keep it out there" in ways that northerners can see themselves. Information needs to help people identify and speak out about abuse - talk about what is right and wrong; what is acceptable behaviour and what is not; and what individuals and agencies can do to prevent and respond to it. Service providers and policy makers agreed that the NWT Seniors' Society has a major role to play in education and awareness efforts.

Service providers and policy makers said that older adults need to be at the core of networks to prevent and respond to abuse. Further, positive role models and local elders'/seniors' groups in each community should be supported by an advocate, coordinator, or facilitator who helps older adults organize and engage others on abuse issues.

Service providers and policy makers agreed that community agencies and front-line workers working together in networks should be supported with the proper authority, tools, and training to prevent and respond to abuse. They suggested that tools may need to include legislation that makes reporting and responses mandatory or at the very least, clearly lays out response options and responsibilities. Many suggested that protocols around such issues as confidentiality should be in place. The Yellowknife Interagency Family Violence Protocol Committee is an example of such a protocol.

Agency Support for Networks to Prevent and Respond to Abuse of Older Adults Service Providers and Policy Makers Said ...

Many agencies participating in this research said that they could support and participate in interagency meetings, assist with training, volunteer as needed, or coordinate. Some agencies would also be willing to pass on information to their clients. A small number of agencies (e.g. faith community, seniors groups) said they would be willing to take a lead role. Among health and social service agencies interviewed, there was some reluctance to dedicate time and resources to an issue that might come at the expense of existing work/mandates. Other agencies noted that their contribution to a

network(s) would be within the scope of existing family violence protocols or agreements.

To support networks and other work to prevent and respond to abuse of older adults, the RCMP suggested that their recording systems could be altered to track abuse. The RCMP could also introduce a special 'crime stoppers' for elders/seniors and more actively support efforts to encourage reporting and solutions to abuse of older adults. The Soaring Eagle Friendship Centre, Dehcho Friendship Centre, and Ingamo Hall Friendship Centre would be willing to provide the administrative structure for a coordinator of a network. In Fort Smith, the Town would help with logistics for meetings and facility use. In other communities, agencies would be willing to help raise awareness.

To participate in a network to prevent and respond to abuse of older adults, several agencies said they would need the permission of a parent organization (e.g. NWT Housing Corporation) or their board of directors (e.g. Deninu K'ue Seniors' Society), or permission to perform activities that are outside existing policies and protocols (e.g. health and social service authorities). A terms of reference for the network and roles and responsibilities would be needed as well as protocols, written agreements, or policies, including:

- a protocol/agreement regarding confidentiality and the release of information.
- an agreement for working together on abuse of older adults in order to sanction some workers' involvement (e.g. social workers).
- an agreement with the NWT Seniors' Society for training and sharing of information.

"Seniors would come forward if they knew their views were kept confidential and not spread all over town."

Service providers and policy makers said that several models exist that could provide guidance to elder abuse networks. These models include: the Yellowknife Interagency Family Violence Protocol Committee, the Supported Pathways Model (that promotes the dignity of elder/seniors in institutional environments), traditional community

models that put elders into a revered and respected place in society, the GNWT integrated health and social services model, community-based interagency models, and committees that are established for family violence awareness week.

4.5 Advice to the NWT Seniors' Society

Older Adults Surveyed Said...

Older adults surveyed had an opportunity to add other thoughts on abuse of older adults. Several identified an urgent need for action and many recognized the key role that education plays in preventing abuse. Some spoke of their own lack of awareness. "I am shocked at my own answers. I didn't realize how little I know about elder abuse in my community."

Service Providers and Policy Makers Said...

Service providers and policy makers were asked to offer advice to the NWT Seniors' Society to support its work on abuse of older adults. Advice varied widely:

- The Society needs to advocate more aggressively for the safety of elders/seniors including community-based 24/7 care, and for family building activities that strengthen relationships in ways that value elders/seniors.
- The legal/RCMP response is not working nor can the RCMP be the only agency to address abuse. The NWT Seniors' Society needs to be a stronger advocate for policies so more front-line workers can intervene. The Society should have elders'/seniors' advocates in each community.
- Given the growing use of the Public Guardian, it would be helpful to have more than one position (e.g. positions in the regions) so that relationships could be established between elders/seniors and their caregivers (e.g. be "part of the team" that works with elders/seniors). The NWT Seniors' Society needs to more actively work on guardianship issues including questioning/intervening to ensure that public guardianship is appropriate.

- The NWT Seniors' Society needs to more actively educate older adults about abuse and train front-line workers to recognize and respond to cases of abuse. It would be useful for the NWT Seniors' Society to make presentations at annual meetings of RCMP, homecare workers, social workers, and others to discuss networks to prevent and respond to abuse of older adults. The Society should also sponsor and actively engage in community development work that strengthens relationships in the communities. The NWT Literacy Council is a very good model of a territorial organization that does community development work.
- The NWT Seniors' Society needs to advocate for documentation and reporting of abuse.
- The NWT Seniors' Society needs to recognize that the Territorial Admissions Committee (TAC) is a barrier to the compassionate care of elders/seniors. Some say that TAC is not taking the advice of front-line workers, preferring instead to do "bureaucratic assessments" that increase elders/seniors stress. The Society needs to be active on this issue and find different or team/case management approaches to elders/seniors placements.²²
- The NWT Seniors' Society needs to advocate for recreation programs for elders/seniors in every community.
- Currently health and social service authorities receive no core funding for aged and handicapped services. There needs to be an increase in the budget for aged and handicapped. The NWT Seniors' Society needs to call the Department of Health and Social Services to task on this gap.
- The NWT Seniors' Society needs to advocate for standards for aged and handicapped services/facilities and make this a mandated service supported by adult protection legislation or policy.
- There has been a shift in the way service providers respond to family violence. The NWT Seniors' Society needs to advocate for the same shift in responses to abuse of older adults.
- The NWT Seniors' Society needs to look at Emergency Protection Orders (EPOs). Currently, the process takes too long eight or more hours. This is mainly

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²² The Health and Social Services website provides an overview of the TAC, including its mandate: http://www.hlthss.gov.nt.ca/english/services/long_term_care/territorial_admissions_committee.htm

because the RCMP does not see the EPO as a priority because the elder/senior is not in immediate danger. Further, elders/seniors may not be treated with dignity, for example, some have waited in social services offices until the EPO comes in. Long waits contribute to elder/senior fears and distress. The lengthy process may cause some elders/seniors to abandon the process.

• The NWT Seniors' Society needs to support elders/seniors groups in all communities.

APPRENDIX A: RESEARCH INSTRUMENTS

Working Together on Elder Abuse

Agency Interview Guide

The NWT Seniors' Society is advocating for networks as a way to respond to and prevent elder abuse (also known as *abuse of older adults*). Agencies providing services to elders/seniors and those dealing with violence and abuse are invited to participate in an interview. Your advice will help in the development of networks and to focus other activities to respond to and prevent elder abuse. The interview will be conducted by Lutra Associates Ltd. on the Society's behalf. Please be aware that this interview is confidential and nothing you say will be attributed to you or your agency.

- 1. What is the legal name of your agency?
- 2. What is your agency's service area (e.g. geographic community/region)?
- 3. What is your agency's mandate? Who does your agency serve?
- 4. How is your agency involved in addressing elder abuse?
- 5. What other agencies in the community/region deal with elder abuse? How does your agency work with these organizations to address this issue?
- 6. What is the incidence of elder abuse in your service area? Is it increasing or decreasing? How is the incidence documented?
- 7. What factors contribute to elder abuse in this community/region?
- 8. In your experience, what actions have worked best in this community/region to prevent/respond to elder abuse? Why were these actions effective?
- 9. What lessons have you learned through past/current efforts to prevent/respond to elder abuse?
- 10. In the NWT elder abuse is generally considered as part of the bigger issue of family violence. Is this an appropriate framework for dealing with elder abuse? Why/why not?
- 11a. The NWT Seniors' Society is advocating for the building of networks as a way to respond to and prevent elder abuse. In your opinion, how would an effective network work?

- 11b. What issues might a fully functioning elder abuse network have to overcome?
- 11c. Do you have any advice for ways to overcome these issues/barriers?
- 11d. What could your agency do to support these networks?
- 11e. What protocols, written agreements, or policies would your agency need in order to support or participate in these networks?
- 12. What models/examples or best practices could inform the development of elder abuse networks?
- 13. Is there any other advice that you can offer to the NWT Seniors' Society to support its work to address elder abuse?
- 14. Can I get your full name and position in case I need to clarify any of the points you raised?

The information collected in this research will be comp	piled and presented at the NWT Seniors'				
Society's Building Networks Symposium scheduled fo	r November 30 and December 1, 2010 in				
Yellowknife. About 100 people will be invited to attend. We are currently collecting names and					
contact information for individuals who might be inte	rested in receiving an invitation to the				
Symposium. Would you be interested in this Symposium? Yes \tag{\tag{1}} No \tag{1}					
If yes, please provide your contact information.					
(name)					
(work telephone number)	(email)				
·					
(agency)					
(mailing address)					
(munitiz dudi Coo)					

Thank you for your time and perspectives.

Working Together on Elder Abuse Individual Questionnaire

The NWT Seniors' Society believes that people and groups in every community need to work together and support each other to deal with elder abuse (*also known as abuse of older adults*). People 50+ years of age are invited to complete this questionnaire. Your advice will help to focus efforts to deal with elder abuse. The information you give is confidential.

1a. Elder abuse in my community is: Check one only.	
A problem	problem
1b. Why do you say this?	
	• • • • • • • • • • • • • • • • • • • •
2. What kind of elder abuse is most common in your community? Che	eck all that apply.
Hitting, kicking, beating, slapping or other physical abuse	
Loneliness, lack of care, over/under use of medication or other neglect	
Disrespect, threats, blaming, 'put downs' or other emotional abuse	
Yelling, name calling, swearing or other verbal abuse	
Stealing money, taking pensions cheques or other financial abuse	
Forced sex, rape, or other sexual abuse	
Don't know	
Other (please name)	

3. In your opinion, do most elders/ser	niors in y	our con	nmunity	/:			
a) know they have the right to live without abuse?			(es 🗌	No 🗀] Not	sure 🗌	
b) know how to protect themselves from abuse?			es	No 🗀	Not	sure	
c) know where to go for help if they need it?			es 🗌	No 🗀] Not	sure 🗌	
d) speak out about elder abuse?			(es 🗌	No 🗀] Not	sure 🗀	
e) want to work with others to stop eld	der abuse	e? \	(es 🔲	No 🗀	Not	sure	
f) know that elder abuse is a crime?)	(es 🗌	No 🗀] Not	sure 🗌	
4. What works best to deal with elder	r abuse?	Check all th	at apply.				
Support groups/buddy system		Calling	the RCI	MP			
Help from social/homecare workers		People	speakin	g out			
Support from family members		Elders/s	seniors l	oeing a	ctive		
Local spokesperson/advocate		Persona	ıl safety	plans			
Emergency Protection Orders (EPOs)		Awarer	ness of a	buse			
Other (please describe)							
Other (please describe)							
5. Please tell us the things that you have done, if any, to deal with elder abuse.							
		•••••	• • • • • • • • • • • • • • • • • • • •			•••••	
		•••••	• • • • • • • • • • • • • • • • • • • •			•••••	
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	• • • • • • • • • • • • • • • • • • • •	•••••	• • • • • • • • • • • • • • • • • • • •			•••••	

6. Which of these things would help apply.	commu	nities deal with elder abuse?	Check all that
Support from leaders		More people speaking out	
Family members helping each other		More people working togeth	ner [
Using other ways to talk about abuse		Education and awareness ab	out abuse
Involving seniors/elders more		Regular social events	
More safe shelters		More support groups	
Training for social/homecare workers		More laws or rules on elder	abuse \Box
Other (please describe)	•••••		
Other (please describe)	• • • • • • • • • • • • • • • • • • • •		
8a. What is the best way to get people abuse? Check all that apply.	e/groups	s in your community to work	on elder
Form an elders/seniors group]	Have training workshops	
Schedule regular social events]	Have internet chat groups	
Have telephone conferences]	Do home visits	
Other (please describe)	• • • • • • • • • • • • • • • • • • • •		
8b. Who should be in charge of gettine elder abuse? Check one only.	ig peop	le/groups in your community	to work on
Elders/seniors	A cor	nmunity service provider(s)	
Local leaders	Every	one should work together	
Other (please describe)			

community? Check all that apply.	ig to do to	help deal with elder abuse in yo	our		
Attend meetings/events		Speak out about elder abuse			
Start a group		Coordinate activities			
Volunteer as needed		Be a champion/spokesperson			
Nothing		Don't know how to help			
Other (please describe)					
10. Is there anything else you would like to say about elder abuse?					
11. To help us compile information, please give:					
a) Your community:					
b) Your age: years					
c) Your gender: Male Female					
d) Your cultural/ethnic background:					
e) Your highest grade/level at school:					
f) Years you have lived in the NWT: years all my life					
g) Your living arrangement:	own home	e/independent with others	/in care		
For more information, please con nwtseniors@uk.com	ntact the N	WT Seniors Society at 867-920-7444	e or		

Thank you for your time and thoughts.

PLEASE DETACH FROM THE QUESTIONNAIRE

The information collected in this survey will be compiled and presented at the NWT Seniors' Society's Building Networks Symposium scheduled for November 30 and December 1, 2010 in Yellowknife. About 100 people will be invited to attend. If you would be interested in receiving an invitation to the Symposium, please provide your contact information.				
(name)				
(home telephone number)	(work telephone number)			
(email)				
(mailing addres	s)			

APPENDIX B: Persons/Agencies Interviewed

Aaron McNab, Dehcho Friendship Centre, Fort Simpson, Executive Director

Abe Daigneault, Soaring Eagle Friendship Centre, Hay River, A/Executive Director

Alphonsine McNeely, Fort Good Hope Justice Committee

Angela Grandjambe, Fort Good Hope Justice Committee

Anita Pokiak, Rosie Ovayouk Health Centre, Tuktoyaktuk, Community Health

Anita Koe, Tetlit Gwitch'in Council, Fort McPherson. Elders and Youth

Arthur Tobac, K'asho Got'ine Charter Community Council, Fort Good Hope, Chief

Barb Lennie, Inuvik Public Health

Bea Campbell, NWT Seniors' Society, Fort Smith

Bernice Hardisty, Fort Simpson Health Centre, Health Promotion

Bertha Francis, Fort McPherson Long Term Care Coalition

Bobbi Hamilton, Hay River Community Justice Committee

Bob Simpson, Inuvialuit Regional Corporation, Inuvik

Carole Barriault, Stanton Territorial Hospital Authority, Medical Social Services

Carol McCormack, William Firth Health Centre, Fort McPherson

Carol Heron Colosimo, Hay River Health and Social Services Social Programs

Cindy MacDonald, Dehcho Health and Social Services Authority, Fort Simpson

Clara Sabourin, Katlodeechee First Nation Health and Social Service Programs

Connie McNab, Dehcho Health and Social Services Authority, Fort Simpson, Homecare

Dawn McInnis, GNWT Justice, NWT Victim Services, Yellowknife

Donna Lakusta, Hay River Health and Social Services, Home Care

Donna McLean, Hay River Housing Authority

Donald Robert, Beaufort-Delta Health and Social Services Authority, Fort McPherson, Social Services

Eddie Dillon, Tuktoyaktuk Community Corporation

Eleanor Firth, Fort McPherson Housing Association

Elizabeth Mackay, Fort Resolution Housing Authority and Mayor of Fort Resolution

Esther Blake, William Firth Health Centre, Fort McPherson, Homecare

Florence Barnaby, Fort Good Hope Justice Committee

Giselle Marion, Tlicho Government, Justice, Behchoko

Hannah Alexie, St. Mathew's Anglican Parish, Fort McPherson

Hayley Maddeaux-Young, GNWT Health and Social Services, Family and Child Violence Protection, Yellowknife

Heather Bourassa, Fort Good Hope Justice Committee

Hilda Gerlock, Fort Simpson Housing Authority, Manager

Jackie Elleze, Dehcho Health and Social Services Authority, Fort Simpson, Homecare

Jane Hobart, Town of Fort Smith, Mayor

Jane Smith, Beaufort-Delta Health and Social Services Authority, Inuvik, Client Services

Janice Tetlitchi, William Firth Health Centre, Fort McPherson

Jason Watt, William Firth Health Centre, Fort McPherson

Jennifer Lafleur, Katlodeechee First Nation Health and Social Service Programs

Jennifer Johnson, Inuvialuit Regional Corporation, Inuvik

John Brockway, Hay River Seniors' Society, President

Jo-Anne Danielson, Hay River Victim Assistance/Witness Program

Joanne Engram, Beaufort-Delta Health and Social Services Authority, Inuvik, Long Term Care

John Russell, Tuktoyaktuk Community Corporation

Karen Felker, Katlodeechee First Nation Judith Fabian Group Home

Lena Selamio, Rosie Ovayouk Health Centre, Tuktoyaktuk, Home Care

Lillian Crook, Hay River Committee for Persons with Disability

Lisa Beaulieu, Social Programs, YH&SS, Fort Resolution

Lois Martin, Dehcho Health and Social Services Authority, Fort Simpson

Louis Balsillie, Deninoo K'ue First Nation, Fort Resolution, Chief

Louise Beaulieu, Sutherland House, Fort Smith

Lucy Young, Family Support Centre, Hay River

Lucy Dillon, Rosie Ovayouk Health Centre, Tuktoyaktuk, Community Wellness

Lynn Napier Buckley, Fort Smith Victims' Services

Lynn Readman, Community Justice Committee, Hay River

Mabel Boniface, Radilih Koe Association (Fort Good Hope), A/Manager,

Mabel Brown, Inuvik Community Justice Committee

Marcella Fabien, Community Justice Program, Fort Resolution

Maria Storr, Community Works Project, Inuvik

Mary Ross, Tl'oondih Healing Society, Fort McPherson

Margaret McDonald, Tl'oondih Healing Society, Fort McPherson

Marjorie Sandercock, Yellowknife Seniors' Society, Executive Director

Matthew James, RCMP, Fort Resolution

Melissa Hardisty-Beaverhoe, Dehcho Health and Social Services Authority, Fort Simpson, Homecare

Michelle Schmidt, Family Support Centre, Hay River

Michele Ray-Jones, Yellowknife Association of Concerned Citizens for Seniors

Millie Manuel, Fort Good Hope Health Centre Prevention and Health Promotion

Minnie Letcher, Dehcho Health and Social Services Authority, Fort Simspon, Community Programs Nora Wedzin, Tlicho Community Services Authority, Behchoko, Continuing Care and Independent Living

Olive Binder, Beaufort-Delta Health and Social Services Authority, Inuvik, Social Programs

Ozell Borden, Pentecostal Chapel, Fort Resolution

Patricia Kyle, Beaufort-Delta Health and Social Services, Inuvik, Community Counselling

Pat Switzer, Dehcho Health and Social Services Authority, Fort Simpson, Community Wellness

Phyllis Mawdsley, Fort Smith Health and Social Services Authority, Community Services

Rita Green, Tuktoyaktuk Community Corporation, Mental Health

Rhonda Vincent, Yellowknife Health & Social Services, Fort Resolution, Social Programs

Rob Gallant, RCMP Hay River Detachment

Ron Pragnell, RCMP, Fort Simpson

Rose Dryneck, Rae Edzo Housing Authority, Manager

Ryan Hewlett, Tlicho Community Services Agency, Behchoko, Health Services

Sandra Beaton, Canadian Mental Health Association, NWT Division, Yellowknife

Scott Buchanan, RCMP Hay River Detachment

Scott Young, RCMP, Fort Smith

Sareta Shae, Fort Good Hope Health Centre, Community Social Services

Sue Clarkson, Beaufort-Delta Health and Social Services Authority, Inuvik, Long Term Care

Susan Fryer, Fort Smith Health and Social Services Authority, Homecare

Suzanne Sihikal, Northern Lights Special Care Home, Fort Smith

Terry Rideout, Hay River Health Social Services, Supported Living Services and Woodland Manor

Terry Villeneuve, Fort Resolution Seniors Society

Theresa Kakkianiun, Fort Smith Health and Social Services Authority, Homecare

Thomas Manuel, Fort Good Hope Justice Committee

Toby Neuendorf, Hamlet of Fort McPherson

Tom Wilson, NWT Seniors' Society, Fort Simpson

Tracy Halfe, Sutherland House, Fort Smith

Wendy Lepine, Fort Smith Health and Social Services Authority, Homecare

Wilfred Simon, Deninu K'ue Wellness Program, Fort Resolution

Winnie Greenland, William Firth Health Centre, Fort McPherson, Community Health

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APPENDIX C: Chronology of Actions in the NWT to Prevent Abuse of Older Adults

1999-2000

NWT Prevention of Elder Abuse Committee formed.

Northwest Territories Health and Social Services proclaimed October 30th to November 5th as the NWT's first annual Family Violence Awareness Week. The Coalition Against Family Violence (CAFV)²³ organizes the theme/materials and holds a territorial launch once a year. This includes a resource kit, poster, and various promotion items that are sent to every community in the NWT and extra materials are always available on request.

2001

Taking Action on Elder Abuse workshops were held in Hay River and Yellowknife and funded through the NWT Prevention of Elder Abuse Committee.

2002

Members of the 14th Legislative Assembly passed a motion in June 2000 recommending the Government of the Northwest Territories conduct a comprehensive review of seniors programming. An interagency working group was assembled to carry out the review. Review activities included a technical analysis of current programs and services as well as consultations with communities, seniors' organizations, caregivers and the general public. The Government of the Northwest Territories' response to the *Review of Programs and Services for Seniors* (February 2002) was published in *Seniors' Action Plan* 2002-2003 *Response to Review of Programs and Services for Seniors* (June 2002).

2003

The Government of the Northwest Territories released its *Seniors' Action Plan Status Report*, which detailed the progress made - to the end of April 2003 - on each action item included in *Seniors' Action Plan 2002-2003 Response to Review of Programs and Services for Seniors*.

²³ The Government of the NWT (GNWT) and the NWT Seniors' Society are part of the 22 agencies that make up the CAFV. Since 2003, CAFV has been working in close partnership with the GNWT to develop and implement action plans that consist of activities that will have a direct impact on family violence in the NWT.

2003/04

NWT Action Plan on Family Violence 2003 – 2008 *Revised Final Draft A Framework for Action.* CAFV prepared and submitted the foregoing report to the GNWT as a call to action.

2004/05

Government of the Northwest Territories Response to the NWT Action Plan on Family Violence: A Framework for Action. The GNWT responds to elder abuse within the context of family violence.

Actions completed between 2003 and 2008 include:

- Implementation Steering Committee created to ensure that the vision of the Action Plan was carried out.
- *Protection Against Family Violence Act (PAFVA)* enacted in 2005.
- 24 hour crisis line operational and public education campaign delivered about the *Act*.
- Yellowknife Interagency Family Violence Protocol and toolkit developed to improve responses to family violence in Yellowknife.
- Staff positions dedicated to addressing family violence created at the GNWT Departments of the Executive and Justice.
- Best practices research on programs designed for abusers.

A Plan For Action 2004 Respect Our Elders - Stop The Abuse prepared by NWT Seniors' Society, a CAFV member. Objectives of the NWT Seniors' Society's plan for stopping elder abuse include:

- Empowering NWT elders to deal with abuse speaking out against violence and abuse.
- Identify and deal with elder abuse education and awareness.
- Deal with the addictions that contribute to abuse.

<u>Protection Against Family Violence Act</u> enabled the implementation of Emergency Protection Orders (EPOs) in 2005 as a tool to protect victims. Since 2005 over 400 victims have taken steps to protect themselves by applying for EPOs.

Fourteen workshops were offered by CAFV in communities resulting in community action plans specific to local needs and priorities.

Family violence brochures and booklets in five languages were produced and posted on the NWT Justice website about:

- Protection Orders Don't put up with family violence.
- Emergency Protection Orders Don't put up with family violence.
- Emergency Protection Orders Seniors and Elders Deserve Respect.

Best Practices for Stopping Abuse of Older Adults in the NWT, 2005 was prepared for Social Development Canada.

Bridging the Gap Conference on the Abuse of Older Adults was organized by the NWT Seniors' Society in November 2005. The conference report is available from the NWT Seniors' Society.

2005/06

The NWT Seniors' Society with funding from Department of Justice Canada participated on the committee in the development of an interagency protocol describing how individuals or organizations should work together when they look into a situation of family violence. A toolkit was developed from the Yellowknife Interagency Family Violence Protocol and made available for application in other NWT communities.

June 15th World Elder Abuse Awareness Day provided a global opportunity to raise awareness.

2007/08

NWT Family Violence Action Plan: Phase II (2007-2012) Enhancing and Expanding the System for Families Affected by Family Violence was prepared by GNWT Health and Social Services

• Building Our Future is one of five strategic initiatives emerging from the vision²⁴ and priorities of the 16th session of Legislative Assembly of the Northwest Territories. Building Our Future provides strategic direction to departments for the implementation of the NWT Family Violence Action Plan Phase II. The Plan focuses on expanding services to smaller communities to alleviate further

²⁴ Strong individuals, families, and communities sharing the benefits and responsibilities of a unified, environmentally sustainable and prosperous Northwest Territories.

impacts from family violence and prevent additional violence by providing treatment to abusers and services to children who witness family violence.

The NWT Health and Social Services Business Plan, 2008-12 commits to a range of enhanced or new services for men, women, children, and elders, specifically:

- Adding resources within the shelter system to offer outreach to those women and children who are victims of violence, but do not choose to use the shelter system.
- Providing services for follow-up and after-care for clients who do use shelters.
- Expanding the *Children Who Witness Violence Program* to Inuvik, Fort Smith, and Yellowknife.
- Developing and delivering a pilot (treatment program) for men who abuse.
- Expanding outreach services to three regions that currently do not have a shelter.

The NWT Justice Business Plan, 2008-12 commits to:

- Building understanding about family violence and supporting RCMP efforts to employ the highest standards when investigating and intervening in these matters.
- Developing and strengthening partnerships with police and communities in order to improve the response to family violence. This will include training, public information, evaluation related to the *Protection Against Family Violence Act*, and work with partners on the implementation of Phase II of the Family Violence Action Plan.
- Increasing police presence in smaller NWT communities. In 2008, Sachs Harbour received a detachment, and planning for detachments in Gamètì and Wrigley is underway. Options are being explored to provide enhanced police services in smaller remote communities without resident RCMP officers, specifically in the following 10 communities: Dettah, Colville Lake, Tsiigehtchic, Nahanni Butte, Wekweètì, Enterprise, Kakisa, Ndilo, Trout Lake, and the Hay River Reserve. The RCMP is finalizing the new national Community Officer Program and the NWT is being considered as a pilot location.
- Researching, developing, and implementing a program for men who use violence in intimate relationships. The program will include positive community reintegration and follow-up, and will be available on a voluntary and/or mandatory basis.

The NWT Department of the Executive Business Plan, 2008-12 commits to:

- An attitudinal survey on family violence. A baseline study of attitudes towards family violence was conducted in 2007. The NWT Bureau of Statistics will conduct a follow-up study in 2011-12 to measure changes in attitudes.
- The *Territorial Expansion Evaluation Report*, 2008 prepared for the Coalition Against Family Violence concluded that the timing was right for broader territorial expansion of the CAVF. A strategy with actions to guide the expansion is in place.

2009/10

Updated family violence publications about Protection Orders, Emergency Protection Orders and Elders Abuse in four languages were made available on the NWT Justice website.

The NWT Seniors' Society held a workshop on abuse of older adults in Inuvik. Workshop notes are posted on NWT Seniors' Society website.

NWT Health and Social Services approved five non-shelter regional projects under the Family Violence Action Plan Phase II.

2010/11

A Pan-Territorial elder abuse information campaign (e.g. with posters and fact sheets) was launched by Health and Social Services on November 30, 2010.

Family Violence Resources listed on the NWT Justice website include:

- Crisis Line: 1-866-223-7775.
- RCMP: Your local three-digit telephone prefix +1111.
- Local shelters and programming.
- Victim Services.
- Family Violence Action Plan, Phase II.
- Link to family violence resources located on the Health and Social Services website:
 - Types of Abuse (physical, sexual, psychological/emotional and financial abuse or neglect).
 - o Abuse of older adults.
 - o Signs that an older adult is being abused.
 - o What can you do to help?
 - o I'm an older adult. How can I protect myself?

- o Why don't older adults tell someone about the abuse?
- o Effects of violence on children.
- Information for victims.
- o We all have a responsibility: What can you do to stop family violence?
- Contact information for NWT social workers (Department of Health and Social Services)
- Child protection (Department of Health and Social Services)
- Coalition Against Family Violence publications.

The Minister of State (Seniors) three year Elder Abuse Awareness campaign - *Elder Abuse – It's Time to Face the Reality* is in the second phase. The campaign will run from October to December and will focus on the issue of financial abuse. Through this initiative, the Government of Canada is working with the provinces and territories, professional associations, and community organizations to take active measures to detect and prevent exploitation of older Canadians.

The NWT Seniors' Society receives funding to undertake Making Connections Building Networks to Prevent Abuse of Older Adults Project (Building Networks Project). The Project is a partnership with the Canadian Network on the Prevention of Elder Abuse (CNPEA), seniors' societies in Fort Smith, Hay River, and Yellowknife, Human Resources and Skills Development Canada New Horizons Elder Abuse Initiative, GNWT Health and Social Services and Department of the Executive, and BHP Billiton. This is a three-phased project; this report is the product of Phase 1 – Information Gathering.

APPENDIX D:

Models and Practices for Stopping Abuse of Older Adults

Northern and Remote Communities

Nuluaq Project

The Nuluaq Project was developed by Pauktuutit Inuit Women of Canada. The purpose was to improve the coordination of abuse prevention services and resources in Inuit communities. The Nuluaq Project involved research and compilation of a national Inuit searchable database and network contact list of about 400 services and programs for abuse prevention in 52 Nunatsiavut (Labrador), Nunavik (Northern Quebec), Nunavut and Inuvialuit communities.²⁵ Information from the database and additional interviews were analysed to prepare companion reports.

A National Stakeholder Advisory Committee on Abuse Prevention was formed in 2005 to create the National Inuit Strategy. The National Inuit Strategy does not specifically address elder abuse however it sets as a goal the steady reduction in incidents of violence and abuse in Inuit communities. The National Inuit Strategy is based on Inuit principles of healing and working together including: working together for the common good; environmental wellness; service to others and leadership; empowerment; resourcefulness and adaptability; cooperation and consensus. The objectives are the development of sustained relationships among partner organizations that are committed to a steady reduction of violence and abuse in Inuit communities; coordinated efforts so that resources can be used to the best advantage; and the implementation of effective, culturally appropriate services and programs to prevent abuse and promote healing.

While the National Inuit Strategy and the Nuluaq Project searchable database do not specifically address elder abuse, the database and general guidelines relating to cross-cultural work and preservation of traditional practices could be applied to the prevention of elder abuse in many First Nations and Inuit communities.

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²⁵ http://www.pauktuutit.ca/nuluaq/default. asp?pg=1022

British Columbia and Yukon Shelter Program

In BC and Yukon, an innovative pilot project has been developed by the BC/Yukon Society of Transition Houses (women's shelters) to provide shelter for abused older women. In conjunction with local women's shelters, private homeowners have been recruited to provide emergency housing for older women in abusive situations. The option of residing in a private home provides a welcome option for some older women, who may have mobility problems, and who would prefer a quieter environment than that of a shelter. The program currently operates in four sites, in both large and smaller communities. Other elements of the project include the development of:

- a handbook documenting the process for developing such a program;
- curriculum for two day training for transition house, safe home and second stage
 workers along with other service providers who work with older women who
 are victims of violence and abuse;
- a video with a study guide can be used by service providers and as a tool for educating the general public on the issues facing older women living in abusive situations;
- a small booklet directed at older women who are experiencing violence and abuse in their lives;
- an information brochure, which will target professionals, caregivers, and support people to assist them in recognizing the signs of older women being abused.

Innovative Programs

Pujualussait Program

Pujualussait offers crisis/safety, counselling/healing services to families, adults, and elders in Pangnirtung. Services are provided in Inuktitut and English. The overall goal of Pujualussait and the healing initiatives it supports is to improve the quality of life for residents of Pangnirtung and elsewhere in Nunavut. The vision of Pujualussait is the development of Pangnirtung as a thriving community where residents are proud of themselves, their families, their community, and their culture. Pujualussait exists to help people help themselves. Healing programs rooted in traditional knowledge and language have been shown to be effective community-based treatment. The holistic reconnection of people to each other and to the land provides the strength and confidence and support for people to figure out ways that work for them and their communities to sustain themselves and empower them to make decisions that fit the circumstances of their lives.

Initsiaq Women's Shelter

Initsiaq Women's Shelter offers crisis/safety, counselling/healing, and safe shelter in Salluit, Nunavik. The shelter provides temporary housing, protection, support, and guidance to women and their children who are victims of violence and to elderly women who are abused within their home environment. Services include emergency housing, crisis intervention, safe environment, moral support and guidance, education about abusive relationships, referrals to community resources, social activities, and community awareness. Services are provided in Inuktitut and English.

Initsiaq Women's Shelter and two other Nunavik shelters collaborated in:

- ✓ a needs assessment;
- ✓ the development of local and regional action plans (e.g. staff and board training plans, workshops and a regional framework for intervention in family violence files);
- ✓ the development of a collective protocol with front-line partners that deal with family violence that provides a clear definition of the services and responsibilities of each partner and procedural guidelines; and
- ✓ the promotion of services through an awareness campaign (posters, pamphlets and website).

Nunavut Kamatsiaqtut Help Line

Established in 1989, Nunavut Kamatsiaqtut Help Line provides an anonymous and confidential telephone counselling and contact service for northerners who need to talk about personal problems or who are in crisis. Counsellors are available to talk, listen, and refer. The Help Line is operational from 7 p.m. to midnight, 365 days per year with two volunteers on the phones. Located in Iqaluit, it serves Iqaluit, other Baffin Regional communities and Nunavik. Help Line Services are provided in Inuktitut, English, and French.

Community Wellness Centre-Cambridge Bay

The Community Wellness Centre offers crisis/safety, counselling/healing, programs, shelter, and support groups to children, youth, families, adults, and elders. Services are provided in English and Inuktitut. The Center's mission is to help people achieve their full potential to become independent, healthy, and safe. Educational programs and counselling services that promote freedom from addiction and violence and encourage positive life style choices help to fulfill the mission.

The Community Wellness Centre delivers a wide range of programs to the community including:

- facilitation of an elders group and support to the Elders Centre.
- crisis shelter for emergencies (women and men accepted).
- a food bank and an income support program to address basic needs.
- advocacy for clients.
- a substance abuse program with counselling for drug, alcohol and gambling addictions.
- healing workshops for both men and women.
- referrals from and to other agencies.

The Community Wellness Centre has an extensive network of partners and stakeholders.

Hollow Water First Nation Community Holistic Circle of Healing (CHCH), Hollow Water, Manitoba

CHCH is an example of a whole family preventive approach to family violence/sexual abuse. Hollow Water is a small Ojibway community located about 200 km. north of Winnipeg. Begun in 1985, CHCH is regarded as the most mature healing process model in Canada. A 13-step program is based on traditional teachings and holistic approaches to involve victims, victimizers, and their respective families. When abuse is disclosed, a coordinated community team responds. Team members include the child protection worker, Community Health Representative, the nurse in charge, the addictions worker, and others as required such as the RCMP, school division and community churches. Most team members volunteer their time. CHCH creates spiritual, physical, emotional, and intellectual balance that benefits the entire Hollow Water community. Most of the offenders that have attended CHCH have taken responsibility for their actions and seldom re-offend. The initiative is a coordinated community response to sexual abuse in Hollow Water. The holistic healing circle is intended to restore balance by empowering individuals, families, and communities to respond in a constructive and healing way to problems of sexual abuse.

Tullivik Group, Pangnirtung, Nunavut

The Tullivik Group in Pangnirtung is an example of the safe home model of services offered to victims of family violence in Nunavut. Tullivik Group offers counselling and works closely with the local health centre, addictions counselors, and mental health workers. The Tullivik Group depends on private homes that are used as safe homes

when necessary. The two safe homes in Pangnirtung are an important resource for abused women and their children and an important part of the 10 safe homes located in five Nunavut communities.

International

Australia

Aged Rights Advocacy Service (ARAS)

ARAS provides support and advocacy to older people using a rights-focused advocacy model. This model aims to support the older person by advising them of their rights and assisting them to uphold these rights. Such rights include the right to make decisions and the right to live free from violence. These are examples of rights underwritten by the International Federation of Aging's Declaration of the Rights and Responsibilities of Older Persons, adopted by the United Nations.

Compulsory Reporting Guidelines for Aged Care Providers

The *Aged Care Act* 1997 requires approved aged care providers to report physical and sexual assault on a resident of an Australian Government subsidized aged care home. Amendments to the Act in 2007 require aged care providers to have systems and protocols in place that enable compulsory reporting of such incidents.

Rights. Respect. Trust. Victorian Government Elder Abuse Prevention Strategy, Implementation Plan, 2006–09

The Strategy was produced in 2005 and the State Government of Victoria has provided \$5.9 million over four years to tackle elder abuse in state communities and implement the report's recommendations. The Department of Victorian Communities through the Office of Senior Victorians has responsibility for coordinating a "whole of government" response. The key strategic areas are:

- Increasing community awareness, support and information for older people in need of assistance by empowering older people experiencing abuse, and providing them with information about their rights and their options for services and supports.
- Supporting communities to promote an environment where older people feel safe and confident and social isolation is addressed.
- Building the capability of professional groups to prevent and respond to situations of abuse.

• Improving the effectiveness of service responses by strengthening collaboration and integration across services.

United States

Illinois Elder Abuse and Neglect Program

A voluntary multi-disciplinary team (M-Team) is located in each of the elder abuse agencies. The teams are comprised of representatives from law enforcement, the legal community, the financial industry, the mental health and medical fields, and clergy, as well as optional representation from domestic violence and substance abuse agencies. M-teams meet eight times per year to discuss difficult cases that are presented to elder abuse program supervisors and caseworkers. Client identity is protected and confidentiality agreements are signed by the volunteer members. M-teams also provide opportunities for increased awareness of elder abuse, training among members, and professional development.

The Financial Abuse Specialist Teams (FAST)

The FAST team originated in Los Angeles and has spread through much of California and beyond. FAST teams focus on financial exploitation of older persons and persons with disabilities. FAST membership is from criminal justice, victim services, health, financial, real estate, and government services agencies. Teams meet monthly to discuss complicated financial abuse cases with the intention of preserving as much of the victims' assets as possible. Financial industry representatives help with the understanding of complex financial transactions and to distinguish fraudulent from legitimate activities. The benefit of broader awareness of financial exploitation crimes among members improves investigation, evidence gathering, and prosecution opportunities.

Colorado Coalition for Elder Rights and Adult Protection (CCERAP)

CCERAP is a non-profit organization that promotes awareness of elder abuse and the rights and protection available to elders and at-risk adults in Colorado. CCERAP supports programs and activities and distributes a quarterly newsletter. Membership is open to professionals from law enforcement, financial institutions, aging and adult services, other service agencies and organizations, and interested community members. Meetings are quarterly. CCERAP's goals are to:

- provide information and training about the abuse of at-risk adults in Colorado;
- promote projects, publications, and activities that benefit at-risk adults;
- advocate for laws, regulations, and policies that promote the rights of elders and at-risk adults; and

• provide opportunities for professionals to meet, share information, address policy issues, and develop strategies for increased service coordination.

National Clearinghouse on Abuse in Later Life (NCALL)

The goals of NCALL are to:

with older victims.

- 1) Improve safety, services, and support of victims by assisting professionals through technical assistance, training, and best practice recommendations;
- 2) Improve responses to domestic abuse in later life by challenging existing beliefs and practices through training and consultation and the creation of new materials; and 3) Give voice to victims and support to advocates and other professionals who work

NCALL has a range of publications and training materials available to help communities develop coalitions, support groups, and enhance domestic violence programs specifically to address the problem of domestic abuse of older adults. The "Building a Coalition to Address Domestic Abuse in Later Life" curriculum may be downloaded. A trainer's guide, community assessment tool, and participant manual are part of the training package. The Community Assessment Tool is useful for addressing the current status of elder domestic abuse in a community and how to respond to it.

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²⁶ http://www.ncall.us/docs/BuildingCoalitionTrainerRev.pdf

APPENDIX E: Bibliography

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