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# COVID-19 AND VIOLENCE AGAINST OLDER PEOPLE

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## Sharp increase in the risk of violence against older people

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Violence against older people – which includes physical, psychological, and sexual violence, financial abuse, and neglect – can have devastating physical and mental health consequences for older people and can even lead to death.

Violence against older people, who are already bearing the brunt of this pandemic, has risen sharply since the beginning of the COVID-19 pandemic and imposition of lockdown measures<sup>1</sup>.

Violence is occurring in homes, in institutions such as long-term care facilities, and online, with a surge in scams directed at older people.

Lockdown and “stay-at-home” orders, likely to last longer for older people, exacerbate those factors which put older people at particular risk of violence<sup>2</sup> – social isolation

and loneliness, mental health problems (depression and anxiety), financial dependency of caregivers on older people, dependency of older people on caregivers, and alcohol and substance use in caregivers.

COVID-19 has led to staff reductions in long-term care facilities, due to illness or self-isolation, and the suspension of family visits, increasing the isolation of residents and the already high risk of violence<sup>3</sup>.

Ageism – the stereotyping, prejudice and discrimination towards people because of their age – pervasive before the pandemic and a risk factor for violence against older people, has worsened during this pandemic<sup>4</sup>. For those women already in abusive situations, gender inequalities and prolonged exposure to their abusers increases the risks of gender-based violence against older women.

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1. <https://bc.ctvnews.ca/tenfold-increase-in-elder-abuse-during-covid-19-pandemic-advocates-say-1.4896176>

2. Storey JE. Risk factors for elder abuse and neglect: A review of the literature. *Aggression and Violent Behavior*. 2020; 50: 1-13.

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3. Trabucchi M, De Leo D. Nursing homes or besieged castles: COVID-19 in northern Italy. *The Lancet Psychiatry*. 2020;7(5):387-8.

4. Han SD, Mosqueda L. Elder abuse in the COVID-19 era. *Journal of the American Geriatrics Society*. 3 April 2020.

# What can be done to address violence against older people during the COVID-19 response

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## Governments and policy makers should:

- Create awareness of increased risk of violence against older people in the public and provide information via radio, TV, print media, and the internet on how victims can seek help and receive support safely.
- Work with essential services such as grocery stores or pharmacies to display information about violence, existing services, and reporting mechanisms.
- Maintain national helplines for violence against older people or, where they don't exist, seek to extend helplines for violence against women and/or against children to cover violence against older people.
- Where movement is restricted, allow older people to leave their place of residence in the case of violence.
- Alert older people and trusted others to the main types of financial scams being perpetrated and provide information on how to avoid them and what to do if targeted e.g. putting phone down/deleting emails or seeking advice from a trusted other before responding.
- Collaborate with other sectors to address violence against older people, such as criminal justice, health, and social services by setting up virtual multidisciplinary teams that can provide coordinated consistent support.
- Increase awareness of violence against older people among community workers and volunteers dealing with COVID-19 and train them to identify and respond to it.

## Health care and COVID-19 testing facilities should:

- Provide information about local services (e.g. helplines, counselling services, adult protective services) for victims of violence against older people, including opening hours, contact details, whether available remotely, and referral pathways.

## Health providers and social services should:

- Watch for/be alert to objective signs of elder abuse. For example, see:<sup>5</sup>
- Provide information, support and, if possible, respite care to caregivers, particularly those caring for older people with dementia, including about how to manage stress, to reduce the likelihood of violence.
- Be aware of the risks and health consequences of violence against older people and offer support and medical treatment to those who disclose violence.

## Residential and nursing facilities for older people should:

- Be more closely monitored by relevant authorities; facilitate residents' contact with family and friends by phone, internet, or via written messages if access is restricted; review staffing procedures (e.g. flexible schedules, work breaks) to better manage the burden of care; and seek to prevent the use of physical restraints.
- Provide guidance and a checklist to help family members and older adults to make decisions about whether to leave residential and nursing facilities.

## Community members should:

- Keep in touch and encourage others (family members, friends, neighbours) to keep in touch with older people online or by 'phone to reduce social isolation and to provide support safely to those subjected to violence.

## Older people experiencing violence may:

- Find it helpful to reach out to supportive family and friends, obtain support from a helpline (including how to access emergency services), or seek out local services for victims.

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5. <https://apps.who.int/iris/bitstream/handle/10665/326843/WHO-FWC-ALC-19.1-eng.pdf?sequence=17&isAllowed=y>