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SAFE

POLICY RECOMMENDATIONS

**WHAT CAN SUPPORT THE PREVENTION AND
TACKLING ABUSE AGAINST OLDER WOMEN ?**



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Introduction

The issues of domestic violence and violence against women are often the subject of debate among policy makers and professionals in the medical and social fields in national, regional or international settings.

Violence against older women could be described as the overlapping of three different but connected phenomena: domestic violence, violence against women and elder abuse and violence.

Although domestic violence, violence against women and elder abuse and violence are widely studied separately, violence against older women is a subject that is rarely discussed or researched and, in the context of an aging population, the lack of specific data and adapted legislation on this issue is an important gap in national and international policy.

The SAFE project aims to draw attention to the subject of violence/abuse against older women and to include it on the agenda of policy makers both in the countries where the project is being done and at a European level.

Purpose of the policy paper

The result of the Intellectual Outcome 3 of the SAFE project – a Policy paper on prevention and intervention in cases of violence against older women - aims to identify ways to strengthen and sustain the ability of public, government, non-government organizations and service providers to prevent, identify and respond in an adequate manner to violence and abuse of older women. The policy paper must focus on social and health care services as well as on training and education in the area of abuse/violence against older women.

Objectives

The main objectives of this policy paper are:

- Evaluating the current situation in each participating country of the institutions responsible for the issue of violence/abuse against older women and the services available for the older women victims of abuse/violence
- Identifying country specific and transnational solutions to the gaps observed during the country evaluation and developing policy proposals aimed at strengthening and sustaining the ability of public or private organizations and service providers to prevent, identify and respond in an adequate manner to cases of violence and abuse against older women
- Creating a potential action model that could be used and adapted by local, regional or national stakeholders in improving their response to violence/ abuse against older women.

In an attempt to gather as much feed-back as possible from professionals working with potential victims of violence/abuse against older women, the project design included collaborative learning groups in each partner country.

The collaborative learning groups were attended by professionals from various fields of expertise – social services, healthcare, psychology, law enforcement, judiciary, VET teachers, NGOs working in the field of elderly care, etc.

Three main themes were discussed during the CLGs:

- 1. Development and consolidation of professional competences through adapted training for different categories of professionals working in the field of violence / abuse against older women**
- 2. Development of inter-institutional cooperation and work relations in each country and between institutions inter-countries at EU level in the field of violence / abuse against older women and for ensuring integrated services in the same field**
- 3. Adopting effective and adapted prevention measures in the field of violence / abuse against older women**

The results of the meetings were included in meeting reports by each participating organization and are the basis for the measures introduced by this policy paper.

Key concepts of the policy paper

Violence/abuse against older women could be described as the overlapping of three different but connected phenomena: domestic violence, violence against women and elderly abuse and violence.

In order to better understand violence/abuse against older women, we need a clear picture of these three overlapping social phenomena as well as the extent to which the specific theme of violence/abuse against older women is being currently known.

The Madrid International Plan of Action on Ageing and the Political Declaration adopted at the Second World Assembly on Ageing in April 2002 (MIPAA) clearly detail the issue of elderly abuse and emphasizes the fact that women are at higher risk of becoming victims of violence/abuse as they age.

Article 5 of the document emphasizes the signatories commitment to “promote gender equality, as well as to promote and protect human rights and fundamental freedoms”, to eliminate “all forms of discrimination, including age discrimination”, recognizes that the elderly “should enjoy a life of fulfillment, health, security and active participation in the economic, social, cultural and political life of their societies” and the need to “enhance the recognition of the dignity of older persons and to eliminate all forms of neglect, abuse and violence”¹.

¹ Political Declaration and Madrid International Plan of Action on Ageing, United Nations, New York, 2002

Specifically on the issue of elder abuse, the MIPAA - Priority direction III: Ensuring enabling a supportive environment, Issue 3: Neglect, abuse and violence states:

- Paragraph 107 “Neglect, abuse and violence against older persons takes many forms — physical, psychological, emotional, financial — and occurs in every social, economic, ethnic and geographic sphere.” „Professionals need to recognize the risk of potential neglect, abuse or violence by formal and informal caregivers both in the home and in community and institutional settings.”
- Paragraph 108. “Older women face greater risk of physical and psychological abuse due to discriminatory societal attitudes and the non-realization of the human rights of women. Some harmful traditional and customary practices result in abuse and violence directed at older women, often exacerbated by poverty and lack of access to legal protection.”²

As part of Objective 1 for Priority direction III: Elimination of all forms of neglect, abuse and violence of older persons, the same document suggests the following actions:

- “Sensitize professionals and educate the general public, using media and other awareness-raising campaigns, on the subject of elder abuse and its various characteristics and causes;
- Enact legislation and strengthen legal efforts to eliminate elder abuse;
- Encourage cooperation between Government and civil society, including non-governmental organizations, in addressing elder abuse by, inter alia, developing community initiatives;
- Minimize the risks to older women of all forms of neglect, abuse and violence by increasing public awareness of, and protecting older women from, such neglect, abuse and violence, especially in emergency situations;
- Encourage further research into the causes, nature, extent, seriousness and consequences of all forms of violence against older women and men and widely disseminate findings of research and studies.”³

Also Objective 2: Creation of support services to address elder abuse proposes the following actions:

- “Establish services for victims of abuse and rehabilitation arrangements for abusers;
- Encourage health and social service professionals as well as the general public to report suspected elder abuse;
- Encourage health and social service professionals to inform older persons suspected of suffering abuse of the protection and support that can be offered ;
- Include handling of elder abuse in the training of the caring professions”⁴

As a result, the MIPAA provides a clear framework for national stakeholders to adhere to in addressing the issue of violence/abuse against older women.

² Political Declaration and Madrid International Plan of Action on Ageing, United Nations, New York, 2002

³ Idem

⁴ Idem

In 2011, the Council of Europe adopted the „Convention on preventing and combating violence against women and domestic violence” that aims to „protect women against all forms of violence, and prevent, prosecute and eliminate violence against women and domestic violence”⁵.

The convention recognizes the fact that women are disproportionately affected by domestic violence that is defined as: “all acts of physical, sexual, psychological or economic violence that occur within the family or domestic unit or between former or current spouses or partners, whether or not the perpetrator shares or has shared the same residence with the victim”⁶.

Violence against women is defined as: “a violation of human rights and a form of discrimination against women and shall mean all acts of gender-based violence that result in, or are likely to result in, physical, sexual, psychological or economic harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life”⁷.

Gender-based violence against women is defined as „violence that is directed against a woman because she is a woman or that affects women disproportionately”⁸

Although the document defines women as including girls below 18 that are affected by domestic violence and/or violence against women, it makes no particular reference to women beyond the age of 60-65 and the particularities of this population group when confronted with these two types of violence.

Similar more recent initiatives such as the 2015 UN resolution „Transforming our world: the 2030 Agenda for sustainable development” or the 2017 EU and UN developed Spotlight Initiative, generally focus on gender equality as well as the empowerment of women and girls, while undertaking to fight against specific issues such as ending discrimination against women and girls and eliminating all forms of violence against all women and girls.

At a global level, the Spotlight Initiative annual report, released in 2018, provides significant data on the dimensions of violence against women and girls:

- “35% of women have experienced violence, as high as 70 % in some countries;
- More deaths are caused by domestic violence, the most prevalent form of violence against women, than civil wars”⁹;

Still the report does not address the issue of violence against older women as a separate issue with specific particularities and risk factors.

⁵ **Council of Europe Treaty Series - No. 210** Council of Europe Convention on preventing and combating violence against women and domestic violence **Istanbul, 11.V.2011**

⁶ **Idem**

⁷ **Council of Europe Treaty Series - No. 210** Council of Europe Convention on preventing and combating violence against women and domestic violence **Istanbul, 11.V.2011**

⁸ **Idem**

⁹ **Spotlight Initiative to eliminate violence against women and girls, Annual Report – 01 July 2017 – 31 March 2018 ; www.un.org/en/spotlight-initiative**

At a European level, The EU Agency for Fundamental Rights released in March 2014 the first survey performed in all 28 members of the union on violence against women and domestic violence.

The survey provides the following significant insights:

- “An estimated 13 million women in the EU have experienced physical violence in the course of 12 months before the survey interviews.
- An estimated 3.7 million women in the EU have experienced sexual violence in the course of 12 months before the survey interviews.
- One in three women (33 %) has experienced physical and/or sexual violence since she was 15 years old.
- Some 8 % of women have experienced physical and/or sexual violence in the 12 months before the survey interview.
- Out of all women who have a (current or previous) partner, 22 % have experienced physical and/or sexual violence by a partner since the age of 15.
- One third of victims (34 %) of physical violence by a previous partner experienced four or more different forms of physical violence.”¹⁰

Although the survey provides a significant image of the phenomenon of violence against women in Europe, it does not provide insight in the situation of older women in relation with violence and / or abuse.

The above described statistics can be a starting point in defining the violence against older women in general. But it does not take into consideration an additional, very important, risk factor – old age - with all its significant physical, functional, psychological, economic and social aspects, as emphasized by the MIPAA convention.

Regarding elder abuse, the World Health Organization defines elderly abuse as "a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person"¹¹

Other definitions expand this definition to situations where there is no relationship of trust between the older persons and their abusers, or to situations where although there is no harm caused to the older persons, there was an actual risk of harm.

The World Report on Ageing and Health, published by the WHO in 2015 estimated that „at least 1 in 10 older people is a victim of some form of elder abuse”¹².

The report also states that:

- the prevalence of elder abuse in high- or middle-income countries for elderly without cognitive impairment living in the community, ranges from 2.2% to 14%, with the most common types being financial abuse (prevalence, 1.0–9.2%), psychological abuse (prevalence, 0.7–6.3%), neglect (prevalence, 0.2–5.5%), physical abuse (prevalence,

¹⁰ Violence against women: An EU-wide survey, European Union Agency for Fundamental Rights, Luxembourg: Publications Office of the European Union, 2015

¹¹ www.who.int

¹² World report on ageing and health, WHO, Luxembourg 2015

0.2–4.9%) but also sexual abuse (prevalence, 0.04–0.82%). The report does not include low-income countries, where numbers are very likely to rise.

- Cognitively impaired older people or institutionalised older people are particularly exposed to the risk of abuse – for people suffering from dementia psychological abuse can range from 28% to 62%, and physical abuse from 3.5% to 23%.
- One of the risk factors for elderly abuse is being female ¹³

The 2016 WHO Elder Abuse factsheet reports the following data:

- „1 in 6 older adults worldwide have been abused in the past year
- In a home setting, 90% of all abusers are family members
- In an institutional setting the abuse reported by the elderly was
 - 33 % psychological abuse
 - 14 % physical abuse
 - 14 % financial abuse
 - 12 % neglect
 - 2 % sexual abuse
 - only 4% of elder abuse is reported”¹⁴

There are also significant differences between community and institution dwelling older people, where abuse is concerned, especially since the elderly being cared for in long-term care institutions are generally frailer and less functional, and have a higher prevalence of cognitive impairment.

Two recent meta-analysis studies, the first looking at elder abuse in a community setting, and the second looking at elder abuse in institutional settings, found that the elderly reported a prevalence of abuse of 15,7% in the past year (approx. 141 million elderly are affected worldwide)¹⁵ while in institutional settings abuse was reported mostly by staff (insufficient data was available from residents in order to provide an estimate) and was 64,2% in the past year¹⁶.

The same studies provided prevalence estimates for different types of elder abuse, and the differences were significant: psychological abuse 11,6% in community versus 33,4% in institutions, physical abuse 2,6% versus 14,1%, financial abuse 6,8% versus 13,8%, neglect 4,2% vs 11,6% and for sexual abuse 0,9% vs 1,9%.

Among other connected data identified on this subject was a 2015 report developed by Help Age International and the Republic of Moldova National Centre for Demographic Research in collaboration with the United Nations Population Fund, „Abuse of older People – a hidden problem”, provided a more clear perspective on the way violence/abuse against older people(60 years or older) is affecting older women in particular.

¹³ Idem

¹⁴ WHO factsheet 2016

¹⁵ Elder abuse prevalence in community settings: a systematic review and meta-analysis, Yongjie Yon, et al, Lancet Global Health 2017; 5: e147–56; February 2017

¹⁶ The prevalence of elder abuse in institutional settings: a systematic review and meta-analysis, Yongjie Yon, et al. European Journal of Public Health.

While the general prevalence of abuse against the elderly was 28,6%, women were found to be mostly affected by this phenomenon:

- 71% of older victims of abuse are women
- 75% of victims of domestic abuse against the elderly are women
- 67% of victims of domestic abuse against the elderly are widows.¹⁷

More specific data on the issue of abuse/violence against older women, although limited, can be found in a small number of papers published in recent years.

A meta-analysis published in 2017 that looked into the existing literature on self-reported elderly abuse among older women, within community settings, found the following reported prevalence:

- „overall elder abuse in the past year – 14,1%
- psychological abuse was 11,8%
- neglect was 4,1%
- financial abuse was 3,8%
- sexual abuse was 2,2%
- physical abuse was 1,9%”¹⁸

The AVOW project Prevalence study of violence and abuse against older women, was a multi-cultural survey performed in Austria, Belgium, Finland, Lithuania, and Portugal. It found an overall prevalence of abuse against older women to be 28,1%. From the type of abuse point of view, the highest reported prevalence was for emotional abuse – 23,6%, and the lowest was for physical abuse – 2,2%. HelpAge International also published in 2017 a discussion paper on Violence against older women with the following key messages:

- „Older women are frequently subjected to one or more forms of violence, abuse and neglect based on their age, gender and other characteristics. This can be driven by ageism, sexism, the intersection of different characteristics or as a result of accumulated discrimination across their life course.
- Violence against older women is not adequately addressed in the majority of research, policy and programmes to prevent and address violence against women and girls.
- International, regional and national legal frameworks fail to adequately address the violence, abuse and neglect to which older women are subjected”¹⁹

In conclusion, the subject of violence/abuse against older women has limited visibility, is inappropriately addressed by policy makers, educators and specialists and has a major impact on an estimated 10 to 15% of the population above 60 years old at a European level.

The limited data available for regions such as Latin America or Africa, where country estimates for women to experience at least one form of violence since the age of 50 can reach

¹⁷ Abuse of older People – a hidden problem, HelpAge International, www.helpage.org

¹⁸ The Prevalence of Self-Reported Elder Abuse Among Older Women in Community Settings: A Systematic Review and Meta-Analysis, Yongjie Yon et al., April 10, 2017.

¹⁹ Violence against older women, HelpAge discussion paper November 2017, HelpAge International, London 2017

75% in Mozambique or 83%²⁰, suggest the estimated percentage of affected elderly is in fact higher.

Last but not least, in order to have a better long-term view on the impact of violence / abuse against older people, we need to take into consideration the ageing of the global population where people aged 60 years and older will more than double, from 900 million in 2015 to about 2 billion in 2050.

Country specific findings

The project partners, representing five European countries (Finland, Greece, Italy, Portugal and Romania), organized as part of the Intellectual Outcome 3, collaborative Learning Groups, in order to assess the national situation and to identify, along with the participating professionals, potential solutions that could be included in this policy paper.

The three main topics that were discussed during the CLGs are:

Theme 1 - Development and consolidation of professional competences through adapted training for different categories of professionals working in the field of violence / abuse against older women

Theme 2 - Development of inter-institutional cooperation and work relations in each country and between institutions inter-countries at EU level in the field of violence / abuse against older women and for ensuring integrated services in the same field

Theme 3 - Adopting effective and adapted prevention measures in the field of violence / abuse against older women

The findings of each country will be detailed further below, along with the recommendations provided by the professionals involved in these debates.

Finland

Legislative context

The main laws regulating violence and abuse against women (and in particular against older women) in Finland are:

- Criminal Code of Finland 39/1889 that includes provisions on domestic and intimate partner violence under
- Chapter 20 -Sex offences 563/1998

²⁰ HelpAge International, The human rights of older people: panel, survey and key findings for Peru, Mozambique and Kyrgyzstan, 2012, <http://sticerd.lse.ac.uk/dps/case/cr/casereport78.pdf>

- Chapter 21 -Homicide and bodily injury - 578/1995
- Chapter 25 -Offences against personal liberty - 578/1995 e.g. Section 7(a) -Stalking 879/2013
- Restraining Order Act and the Criminal Code Section 9(a) 898/1998 -Violation of a restraining order 902/1998
- Convention on preventing and combating violence against women and domestic violence (Istanbul Convention) - entered into force in Finland on 1 August 2015.
- Act on State Compensation to Producers of Shelter Services that guarantees qualitative and comprehensive shelter services like high quality immediate assistance in crises situations, 24/7 living and psycho-social support, counselling and guidance for all victims regardless of residence and free of charge.
- The Social Welfare Act 1301/2014 - concerns older people in defining the needs for which social services are required to respond amongst others elder abuse and neglect. Starting from early 2015, the act has provided public and private sector organisations with an obligation to create a self-monitoring plan. Prevention of elder abuse is part of the required plan. Social Welfare Act, it has been compulsory for workers in social services to report elder abuse or concerns of the safety of an older person
- The Act on Supporting the Functionality of Older Persons 980/2012 imposes that the assessment on an older person's needs is to be made in a comprehensive way considering both one's functionality and safety. The recommendation of the Ministry of Social Welfare and Health mentions elder abuse as a risk factor for decreased functionality in older age.
- The Act on Supporting the Functional Capacity of the Older Population and on Social and Health Care Services for Older Persons is also an essential operational guideline in helping individual staff members to report cases of elder abuse and provide required help for older people who are at risk of getting abused or neglected

Theme 1: Development and consolidation of professional competences through adapted training for different categories of professionals working in the field of violence / abuse against older women

Currently in Finland, in the field of elderly care education, learning methods are mainly student oriented. This creates a particular situation since the curricula of social and health care students is individually personalized based both on the courses the student is interested in taking and the input of the teacher.

The methods of learning (face to face, interactive, hands on, online) and the practical aspects of learning also vary based on the needs and wishes of the student.

The subject of elder abuse is not included in the official curriculum of social and health care students, and although such courses are available for students, these are optional / recommended courses that may or may not be a part of student training, depending on the choice of the student.

This situation creates real challenges in educating students on violence against older women and increases the workload of the teachers.

Teachers also acknowledge their own need to further develop their knowledge and skills on the issue of violence against older women in order to educate their student since the number of elderly persons cared for by their students is on the rise.

The participating teachers agreed that training for both teachers and students on the issue will lead to an increased level of interest in the subject of violence/abuse against older women.

At a national level, in Finland, there are three legislative documents that emphasize the need for training on violence/abuse against the elderly of the professionals.

The act on Supporting the Functional Capacity of the Older Population and on Social and Health Services for Older Persons 980/2012 (25§ Informing of an older person's service needs) and Social Welfare Act 1301/2014 (48 § The obligatory informing duty of staff, starting from 01.1.2016) – according to both acts it is compulsory for the professional to report if the safety of an older person is at risk – as a result they need to be able to recognize and assess these risks.

A training recommendation is also included in CM/Rec(2014)2 of the Council of Ministers – Protection from violence and abuse, under Paragraph 18.

Participants agreed that although learning needs vary depending on the professional being trained, there is a basic amount on knowledge that all professionals should be familiar with. The basic knowledge should include:

- Signs/indicators of elder abuse
- Obstacles/challenges that older persons/women victims of violence are facing
- Consequences of violence,
- Complex trauma caused by violence
- How to work with older trauma survivors
- Support of older female victims
- Elder abuse and dementia
- The training providers that should be included in implementing courses in the field of violence/abuse against older women should be:
 - Vocational Colleges,
 - Universities of Applied Sciences,
 - Other Universities involved in training professionals that manage cases of abuse against the elderly

Recommendations:

- Basic knowledge on violence/abuse against older women, should become an official part of the curriculum, both in the basic and the advanced vocational training of social and health care professionals.
- The curriculum should be further developed for specific categories of professionals depending on their specific learning needs.

- Institutions such as VET providers, Universities and national institutions such as the National Institute for Health and Welfare, that have an important role in setting curriculum requirements and providing specialized training, should be involved in implementing the mandatory curriculum for all professionals involved in managing cases of older women abuse.

Theme 2: Development of inter-institutional cooperation and work relations in each country and between institutions inter-countries at EU level in the field of violence / abuse against older women and for ensuring integrated services in the same field

In Finland, violence against older persons can be recognized in all services used by the elderly.

The main ones are:

- Hospital emergency rooms
- Home care services - most often since home care workers are in longer contact with clients.

For these services, there are two different types of social services (hospital and municipal) that are responsible with managing suspected or identified cases of abuse against older persons.

The meeting participants considered that better cooperation between the hospital social services and municipality social services is needed.

A multi-agency model for recognizing and addressing cases of elder abuse was developed between 2016 and 2018 by the Eastern District of Helsinki social and health care services.

This model is being disseminated to other districts as a local good practices model, and needs to be adapted to the local demographic indicators such as the dimensions and age structure of the local population.

Given the demographic variability between districts the participants considered that developing a model applicable to all situations is a challenge, but is necessary.

Currently in Finland there are several policies aimed at encouraging inter-institutional cooperation.

Starting in 2008, the Ministry of Social Affairs and Health put in place a set of guidelines for the coordination and management of preventive work against violence.

These guidelines aim to support local and regional cooperation for the prevention of interpersonal and domestic violence.

Since these preventive activities are seen as part of the municipal and administrative sectors responsibilities, they should be included in the municipal welfare strategy, security planning, and the action plans of social and health care organizations with a large population base.

Finland has a local or regional level reporting system for cases of elder abuse – the “Concern notification system”. Social services workers or other professionals that may be

involved in managing such cases have the legal obligation to report any suspected or clear cases of elderly abuse.

The legislative documents that establish this obligation are:

- Act No. 980 /2012, the Social Welfare Act 1301/2014
- Local Action Strategy of Ageing 2002 (MIPAA/RIS)

Recommendations:

A mandatory centralized systematic data collection and analysis on elder abuse should be done by all social and health care services.

Theme 3: Adopting effective and adapted prevention measures in the field of violence / abuse against older women

Any preventive action requires a good statistical analysis of the phenomenon it is trying to prevent.

In Finland, the National Institute for Health and Welfare (THL) is responsible with collecting, documenting and disseminating national data on domestic violence services, as well as coordinating the prevention of domestic violence and violence against women.

Among its activities are:

- Research and development work,
- Education and expert help – national - in collaboration with regional actors, THL organized regional training for trainers on interpersonal and domestic violence
- National and international co-operation and monitoring
- Communication and publishing activities – THL has published the domestic violence questionnaire and assessment form used for interpersonal and domestic violence screening

The activity of THL is in line with the MIPAA declaration, that under Chapter III. Implementation and follow-up/National action - paragraph 119 requires: “educational, training and research activities on ageing; and national data collection and analysis, such as the compilation of gender and age specific information for policy planning, monitoring and evaluation.”²¹

Although currently in Finland there are no screening programmes on abuse against the elderly, the Resident Assessment Instrument is widely used to evaluate the health and well-being of older people both by private and public care providers. This instrument contains an indicator related to abuse and can provide information on the issue.

Also as part of the effort to identify good screening instruments in this field, the Daphne project piloted the Elder Abuse Suspicion Index © (EASI) in a Helsinki city hospital in 2018.

The participants also considered another available instrument - the REAMI screening tool.

²¹ Political Declaration and Madrid International Plan of Action on Ageing, United Nations, New York, 2002

They found it to be too long for applicability in homecare settings but quite useful in training activities on risk factors for violence/abuse.

Recommendations:

- Development of screening programmes for elder abuse for all elderly care services.
- Training on screening tools for social and health care professionals
- Services for support for professionals should also be available.

Greece

Legislative context

The Greek legal framework does not include laws and provisions that criminalise specifically violence against older women, as most of the criminal acts are included in the General Penal Code.

- Fundamental Rights are protected by the Constitution of Greece. Article 7, paragraph 2: Torture, any bodily maltreatment, impairment of health or the use of psychological violence, as well as any other offence against human dignity are prohibited and punished as provided by law.
- Law No. 3500/2006 for combating domestic violence protects women, men and children from physical and sexual abuse, threats of great and imminent danger, coercion to violence and the insult of sexual integrity. Article 6, paragraph 3: violent acts against family members that are considered incapable to resist have more severe penalties.
- Law No. 4531/2018 Greece has ratified the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence.

Theme 1: Development and consolidation of professional competences through adapted training for different categories of professionals working in the field of violence / abuse against older women

The participants agreed that the professionals that should receive training on the issue of violence/abuse against the elderly should be the following:

Social workers

- They manage incidents of domestic abuse
- Manage care for the victims of violence

Doctors

- Evaluate the extent and nature of injuries and treat the victims of physical abuse, also are a respected profession

Psychologists

- Evaluate the act of violence and the circumstances in which it occurred, are able to support victims of psychological abuse and their families
- Can assist in the development of policies by providing valuable insight on profiling the abusers and preventive actions in the field of violence against older women

Nurses

- Treat victims of abuse and act as a mediator between the victim and other professionals.
- Create a relation of trust with the victim and may obtain important details regarding the abuse

Physiotherapists

- Help with victim recovery and assist nurses on their activities

Gender-Based Violence experts

- Provide expertise on gender based violence
- Provide insight for developing policies that address the perpetrator and help in creating perpetrator profiles
- Support the recovery of older women victims of abuse

Currently, in Greece there are no institutions that are specifically responsible with providing training in the field of violence/abuse against older women.

A number of NGOs like the Nestor Psychogeriatric Association, Help at Home, the Association of Women's Organizations and Diotima provide care to elder victims of abuse or to victims of gender based violence, but none of them specializes in both.

All participants agree that training is necessary in both standard and continuous forms, and that continuous training needs to be updated on a yearly basis.

The institution that should be in charge of developing and implementing such training activities was, in the opinion of the participants, the Greek Social Workers' Association.

With regards to the learning needs of the professionals on the subject of abuse, the participants agreed that there are two main aspects that need to be included

- legal aspects – the legislation in the field of violence/abuse against older women is unclear, and does not provide appropriate guidance on the steps to be taken in the intervention for abuse victims and what are the procedures to be followed in reporting cases of abuse.
- practical issues – these refer to managing cases of violence – organizing and providing care to the victim.

Training on these aspects need to start at a university level for Social Work students and needs to continue throughout the professional life as continuous training.

Currently, in Greece, there are no training methods in the field of violence/abuse against older women and as a result there are no evaluation tools available.

The main areas for development and consolidation of professional competences were considered to be:

- the psychological characteristics of the older people in general as well as specific psychological aspects of older women victims of abuse.
- awareness on diversity (especially regarding older foreign women)
- practical issues such providing care in case of trauma and emotional support for victims of abuse.

The financial resources for covering the training needs of professionals should be provided by the state.

The state should also fund preventive activities in this field by creating a specific prevention and investigation department, as part of the police force.

Recommendations:

- training on violence/abuse against older women should become mandatory for a number of professionals that come in contact with the older women victims of violence or abuse.
- the training should be organized by the Greek Social Workers' Association as a certified training program and funded by the state, starting from university and continuing with ongoing training throughout the professional life.
- training should include :
 - Ways to identify and approach an incident of abuse
 - Ways to approach an abused person both physically and psychologically
 - Psycho-education on how to help the close family members of the victim
 - How to cooperate with other professions for a better outcome
 - Legislative framework
- On-going evaluations of the efficiency and quality of the work done by trained professionals should be performed by independent organizations.

Theme 2: Development of inter-institutional cooperation and work relations in each country and between institutions inter-countries at EU level in the field of violence / abuse against older women and for ensuring integrated services in the same field

The participants identified a number of four public and private institutions currently involved in providing services for victims of abuse.

All provide different types of services at a national level such as:

- Life – Line - state run phone line dedicated to the psychological support and counselling for victims of abuse over 65 years old as well as receiving reports of incidents of abuse;
- Nestor Psychogeriatric Association – NGO providing a phone help line for victims of abuse over 65 years old, day centres for elderly suffering from dementia as well as psychiatric services;

- Association of Women's Organizations – NGO providing services for women of all ages – protection of human rights, support for victims of abuse;
- DIOTIMA – NGO that provides psychological and legal support to women in general.

The participants suggested creating a database with what they consider to be relevant data for cases of abuse that would be accessed by organizations managing cases of abuse. GDPR regulations should be considered when developing the data base and a legal framework should be created for this purpose

The data that should be gathered are details on the cases of abuse, such as - age, gender, ethnicity, socioeconomic status of both the victim and the abuser and data on how the abuser was approached

This data could help the organizations create a case map and a profile of the abusers, allowing for the early detection of high risk cases.

Participants also agreed there must be more communication and cooperation between organizations that are involved in the management of abuse cases since the prevalence of such incidents is currently under-evaluated and it needs more attention from the media, the public and mostly from policy makers.

One way to achieve that would be by creating an institutional network and disseminating its' findings to the public and interested stakeholders through newsletters.

The participants also identified a number of barriers in the development of such a network:

- The limited number of organizations that work specifically with the target population
- The requirements of the GDPR legislation that needs to be followed. Legal exceptions could be created for such an institutional network.

As a way to sustain the activity of this institutional network, all members should have dedicated staff that is trained in the field of violence/abuse of older women. Clear protocols for communication, cooperation and responsibilities within the network must be in place in order to allow the members to help as many victims as possible in the best possible way.

A mandatory member should be the law enforcement institution of the country (e.g. the National Police) in order to expedite the intervention and resolution of cases of abuse.

Recommendations:

- The State should appoint education providers (public or private) to be responsible for creating and implementing specific training programs.
- Having specialists in the field of violence against the elderly and specifically older women, would encourage the organization of organizations addressing the issue.
- Facilitate the establishment of such organizations and networks

- Provide the appropriate funding for the tools needed and for appropriate staffing of these organizations
- Such organizations should establish an institutional network that would allow them to better manage the cases they are dealing with as well as to collect data on the real dimension of this social phenomenon.

Theme 3: Adopting effective and adapted prevention measures in the field of violence / abuse against older women

Currently, in Greece, there are no organizations undertaking preventive actions in the field of elder/older women violence/abuse.

Individual preventive actions are done by some social workers in their day to day activities whenever they deal with victims of abuse - they try to investigate the case as much as possible and report such incidents or situations to the police.

Recommendations:

- Raising awareness on violence/abuse against older women, through large social media-based campaigns, is an important aspect in further addressing this issue in Greece, since the general public and policy makers don't fully comprehend its' magnitude and cannot, therefore, take action.
- Make elder women feel safe when reporting an abuse incident. Protection should be offered to them as soon as the report has been made and up until it has been resolved.
- Make it easy for the victims to report an incident of abuse incident. The following should be very clear: who and how they should contact in case of abuse and what the expected response time is.
- Create a registry of older women living alone or needing assistance, in order to do regular wellness checks.

Italy

Legislative context

The main laws regulating the instances of violence and abuse against women in Italy are law n. 69 of 19 July 2019, the Code of Criminal Procedure and other provisions on the protection of victims of domestic and gender violence, so called "Red code". The law passed in 2019 as a result of social alarm caused by the high number of violent crimes, that introduces specific types of crimes (like the violation of penal restraining orders, coercion or induction to marriage, etc.), increases penalties for already existing crimes and, improves the discipline of the criminal proceedings code in order to prepare a prompt response mechanisms to the phenomenon of gender violence.

Additionally, the law:

- enforces participation to specific recovery paths in case of conviction for crimes of domestic and gender violence,
- increases the duration of incarceration for the crime of ill-treatment against family members and cohabitants with aggravating circumstances when committed in the presence or in the damage of a person with a disability (as usually elder women are),
- imposes a life sentence punishment for homicide against a person permanently cohabiting with the perpetrator or linked to him/her by an affective relationship,
- decides for a punishment of twenty-four to thirty years imprisonment, if the crime is committed against the divorced spouse, the other part of the civil union, where terminated, the person related to the guilty by stable cohabitation or emotional relationship, where ceased, the brother or the sister, the adoptive or mother, or the adopted son, or against a cognate in a straight line,
- increases the punishment for the crime of sexual violence has been increased: imprisonment from six to twelve years and increases the deadline for the complaint by the injured party from six to twelve months,
- increases the punishment for crimes of persecutory acts: imprisonment from one year to six years and six months.

The criminal proceedings code was also changed:

- The judicial police have the duty to report immediately, even in oral form, the crime to the public prosecutor. The oral communication must follow, without delay, the written one.
- The public prosecutor, within three days of the registration of the crime report, takes information from the victim or from the person who reported the crime. However, this deadline may be extended: when there are needs to protect minors or the confidentiality of investigations.
- The judicial police has to proceed without delay to the carrying out of the investigative acts delegated by the Public Attorney and puts, always without delay, at the disposal of the PA the documentation of the activities carried out.
- The victim must be informed, from the first contact with the proceeding authorities, also in relation to all assistance services to victims of crime.
- In cases of gender based violence crimes, there is an obligation to immediately notify the injured person and his/her lawyer, where appointed, of the release and termination of the security detention measure, the evasion of the accused in custody or the convicted person, and the voluntary removal of the internee from the execution of the detention security measure.
- In the event of revocation or replacement in Melius of the precautionary measure it is stipulated that any provision issued by the judge - either ex officio or at the request of the party - be immediately communicated, by the judicial police, to the social services, to the injured person and his/her lawyer, where appointed.
- The provision of the surveillance judge that orders the release of the convicted for gender based crimes must be immediately notified, by the public prosecutor through the judicial police, to the injured person and his/her lawyer, if appointed.

Theme 1: Development and consolidation of professional competences through adapted training for different categories of professionals working in the field of violence / abuse against older women

The main professionals that play important roles in the field of prevention and intervention in cases of abuse against older women and should be involved in combating violence and abuse against older women are:

Social workers

- Have a legal duty to protect vulnerable clients and have the skills to do so
- Can activate services of support (i.e. home-care; residential care; economic support; etc.) as well as protective measures

Assistant nurses / nurses

- Are very close to older persons and can observe signs of potential abuse (they enter the houses of older persons, they can see them undressed etc.)
- The care services are a potentially risky context: changing their working practice, as a result of training, can be very effective in terms of prevention.

Managers of care services

- Have an impact on organizational policy and practice, that can be either risk *or* protective factors (issues like burn out, selection and training of staff, setting of work-plans, etc. need to be addressed)

Doctors

- Can observe signs of potential abuse (access the houses of the elderly, see them undressed etc.)
- Can make a differential diagnosis between signs of abuse and other causes.
- Are generally a trusted profession (especially for the older people)
- Can support preventive and protection plans involving addicted or mentally ill abusive children or spouses.

Psychologists – social educators

- can help the victims to disclose the abuse
- can support the treatment of trauma

Police

- receive and investigate reports of abuse
- take action in situations of clear abuse can prevent re-victimization

Lawyers

- can provide legal support to victims of abuse

Judges

- can enforce protective techniques during trial (protected audition)
- can ensure preventive measures
- can balance judgments between punishing the abuser and protecting the victims
- can initiate protective measures for incompetent victims

GBV experts

- are in contact with older women victims of domestic violence
- are experts in treating violence related with gender

All participants agreed that training in the field of abuse/violence against older women is essential and it should be part of the basic training for all the professionals identified as managing cases of abuse. Training also needs to be refreshed on a regular basis.

Currently none of these professionals study the topic of elder abuse prevention as part of their standard training curriculum. This topic can be chosen as a complementary topic (for example psychologists might study trauma or victimology) or training on similar topics is available (eg in the case of social workers who are trained in dealing with abuse against children).

The participants believe that the lack of attention paid to this topic by VET institutions and Universities might be linked to an ageistic attitude that affects the choice of priorities for the training curriculum.

A first step in changing these attitudes would be, in the view of participants, raising awareness and as a result changing the ageist aspects of this culture.

According to the group, it would be useful to target the following institutions:

- Regional institutions responsible for VET – in order to include the topic in the standard curriculum for assistant nurses.
- Professional boards (social workers, lawyers, nurses, psychologists, etc.) so that they can promote training opportunities for their members on this topic.

An important aspect is also to train the professionals responsible with auditing residential care facilities, since currently audits are more focused on checking formal issues (such as the number of staff employed, etc.) rather than on understanding the quality of life of residents.

Participants agree that the initial training and its specific contents should be adapted to type of professional being trained (eg. students of social work should learn concepts and procedures based on the responsibilities and roles of their professional profile).

With regards to ongoing training, it should be done in multi-professional groups in order to encourage sharing of different point of views and experiences. Ongoing training should be focused on issues that impact the daily work of professionals, so that they are motivated to participate.

Teaching methods should include a practical / experiential approach.

Currently, in Italy, expert trainers for this topic are lacking and also there is no available experience on methods for monitoring training.

The participants considered all topics already included in the SAFE curriculum should be included in training, focusing more on the following issues, that should be included in all training for social services and care professionals:

- Burn-out prevention.
- Managing power imbalance in care relationships as the basis of abuse prevention.
- Intergenerational intelligence / education to deal with diversity.
- With regards to budgeting and resources, the participants consider that if the topic is introduced in the standard curricula, no additional resources would be required.

For continuous professional development training, possible resources are:

- the inter-professional funds for training,
- funding budgeted by private companies for training
- sponsorships.

In Italy since the area of gender-based violence is better financed and has a high level of visibility, participants suggest trying using this channel to further improve training on the issue.

From a policy point of view, the topic of abuse/violence against older women, should be included in the standard curricula of professionals that manage such cases of abuse and training should be mandatory for the professionals that work in practice with older persons.

Recommendations:

- Training in the field of abuse/violence against older women be a mandatory part of the basic training for all the professionals identified as managing cases of abuse.
- Ongoing training should also be developed, and should be done in multi-professional groups to encourage sharing of different points of views and experiences and focus on issues that impact the daily work of professionals.
- VET institutions and Universities should be involved in developing such training and include it in the standard curriculum in order to avoid budgeting issues
- Professional boards should also encourage participation to such trainings
- Training needs to be adapted to the needs of the professional being trained
- Teaching methods should include a practical / experiential approach.
- Increase the number of trainers for this particular subject
- Alternative budgeting sources should be identified – such as interprofessional training funds, private companies funding or sponsorships for continuous training.
- Using already existing frameworks to raise awareness and develop actions on the topic

Theme 2: Development of inter-institutional cooperation and work relations in each country and between institutions inter-countries at EU level in the field of violence / abuse against older women and for ensuring integrated services in the same field

Because of the structure of the Italian social system, according to the group, the service integration can only happen at local level as every Region has different social systems.

The participants identified local public institutions, functioning at a district, municipal or provincial level, such as the social and healthcare services (including GPs), GBV support services, law enforcement and legal institutions and address the needs of the entire population or vulnerable citizens that include the elderly and the disabled. Such institutions are accessible either by phone or by following a specific formal process.

GBV services and NGOs that have mixed funding (both public and private) that provide services to the vulnerable elderly.

Services provided by these institutions are:

- Psychological support
- Assistance with housing
- Legal support
- Economic support
- Home and residential care
- Health care services – prevention, diagnosis and treatment for health conditions
- Law enforcement services

Some national institutions were also identified as potentially relevant for the issue of abuse/violence against older women but in the view of participants, it is unlikely that they can have an impact in an inter-institutional cooperation for cases of abuse since their work doesn't have a direct impact at local level.

- National Department for Equal Opportunities (dealing with gender-equality issues)
- National Ombudsman for Prisoners (it monitors psychiatric units for compulsory treatment cases)
- UNAR – National Office for Discriminations (theoretically it has competence in all types of discriminations, including gender based and age-based discrimination, but there is practically no attention dedicated to the latter).

The participants also stressed that there is a need to raise awareness in the general public and more specifically among the elderly, so that they become more able to protect themselves.

The participants agreed that some examples/templates of partnership agreements that include clear stipulations on privacy issues would be useful.

An example of a cooperation protocol, developed during the first part of the project was then discussed.

It was agreed that a formal protocol for communication and cooperation would be useful in clarifying the roles and simplifying the relationships between the different organizations potentially involved in managing such cases.

Currently in Italy, cooperation depends on personal relationships created by professionals at local level, a situation that has a negative impact on victims.

The participants agree that there is a need for a central managing organization that would involve all participating organizations as well as coordinate activities.

Since currently there are no standardized intervention protocols, professionals are unsure about what to do, afraid to take action and ultimately not as proactive as they should be with victims.

Clear guidelines, possibly approved by the professional boards, would be very useful and must be enforced.

Also, because the network of services to support women victims of gender based violence is well developed in Italy, these services should be made accessible to older women (both from a physical accessibility and a suitability point of view).

The group also recognized the fact that there is limited availability of legal counselling in the case of the elderly. Cooperation between the Board of Social Workers and that of Lawyers is needed, as legal advice would be very useful to treat correctly cases of abuse.

As barriers, the group stated that such protocols can't be implemented very easily because they are not seen as a priority for many organizations (eg. the Police, the Tribunal).

It would be useful if at least a territory can implement such a protocol experimentally, since it would be used as good practice for others.

State authorities should issue an official call for setting up experimentally such a network.

On the long term, the network could be rather informal but it must have a clear political mandate of inter-institutional cooperation.

A possible good practice example framework for such an inter-institutional cooperation could be district "Area Plans" (Piani di Zona) that all Italian districts need to develop and implement in the field of social services. As per legal requirements, these plans are co-developed with all local public and private stakeholders in order to promote the collaboration of different agencies on relevant social issues.

Also, in order to encourage the long-term implementation of such networks, it is important to emphasize the advantages for the different services (for example, the shared responsibility in case of difficult situations or the increase of their skill and, consequently, more ease to tackle them).

Recommendations:

- Awareness should be raised among the general public and more specifically among the elderly on the issue of abuse/violence against older women. Awareness would increase political support to develop such an inter-institutional cooperation network.
- Such a network needs a central managing organization.
- A formal protocol for communication and cooperation should be developed in order to clarify member roles and relationships.
- Clear standardized intervention protocols would also need to be developed including guidelines that could be approved by the professional boards

- Using the already existing network for services to support women victims of gender based violence for older women victims of abuse.
- It would be important to encourage the cooperation with the legal authorities in order to ensure legal support for cases of abuse.
- Authorities should issue an official call for setting up an experimental district level network that could then be disseminated as a good practices example.
- Using official recognition of residential facilities that are examples of good practices to encourage the adoption of such practices.
- Professional boards should be involved in developing and disseminating guidelines and protocols.

Theme 3: Adopting effective and adapted prevention measures in the field of violence/abuse against older women

The institutions are the same as the ones mentioned in Theme 2, with the exception of the Police Forces.

According to the participants, in prevention we should focus on:

- Raising awareness among the general public / non-specialised services which might be in contact with older persons victims of abuse (such as clubs, pharmacies, churches, NGOs etc.)
- Involving social services and GPs in prevention activities because they often know the family situations and networks of older persons and can identify risk factors and work on preventive factors to prevent abuse
- Involving care services, as a risky environment *per se*, where a lot can be done to work on prevention. Managers are considered very important in preventing burn out, promoting a culture of respect for the dignity of older persons and promoting a culture which encourages the staff to report cases of abuse

One participant underlines the fact that in elderly care, the act of care is viewed mostly from a medical point of view, reducing the psych-social intervention. This approach can have an impact on preventive activities. For example, if an older person shows discomfort, it's more likely than this is attributed to dementia or depression rather than something wrong happening in their relations.

Recommendations:

- Train professionals on preventive approaches.
- Ensure that those who decide to start a profession in the care field have a clear idea of what it means and realistic expectations
 - Train management staff on abuse prevention
 - Protect the person that reports. If reporters are not protected reporting is discouraged.
 - Ensure safe intervention, by providing clear intervention guidelines – especially in the case of persons with cognitive impairments.

- Clear deterrent measures in cases of abuse for professionals including revoking the right to practice for the professional involved.
- Criminal records check and the collection of reference letters at employment should be mandatory in the private care sector.
- Close monitoring of know situations of addicted/mentally ill relatives living with elderly
- Services working with migrant domestic care workers should be involved. They are in a position to detect early potential risk factors (for example over-burdened care workers).

Romania

Legislative context

The Romanian legislation does not include laws and provisions that specifically criminalise violence against older women.

These cases are generally included in the legislation issued to address domestic violence:

- Law nr 174/2018 modifying and completing Law nr 217/2003 on preventing and combating domestic violence that is the legislation created to ratify and implement the requirements of the Istanbul Convention. It focuses on a victim-centered approach as well as on preventive measures as well as emergency intervention measures for high risk situations.
- Law nr. 30/2016 for the ratification of the Istanbul convention;
- Government decision nr. 1156/2012 on the approval of the National Strategy on preventing and combating domestic violence between 2013-2017;
- Government decision nr. 49/2011 approving the framework methodology for the intervention as a multi-disciplinary team or as a network in cases of domestic violence;
- Law nr. 286/2009 the Penal Code, with further changes;
- Law nr. 135/2010 on the Penal procedure code with further changes;
- Law nr. 211/2004 on the protective measures put in place for the victims of crime that stipulates informing the victims of their rights, psychological support, free legal support, and financial support.
- Order nr. 383/2004 with it's further modifications on the quality standards for the social services dedicated to the victims of domestic violence.
- Order nr. 384/306/993/2004 issued to approve the procedure for cooperation in preventing and monitoring the cases of domestic violence.
- Order nr. 304/385/1018/2004 to approve the Instructions for the organization and function of the facilities for the prevention and combating of domestic violence.
- Law 292/2011 - social care
- Order nr. 2126/2014 with it's further modifications on the minimum quality standards to approve the social services dedicated to the elderly;

Theme 1: Development and consolidation of professional competences through adapted training for different categories of professionals working in the field of violence / abuse against older women

In Romania, the professionals working in the field of violence / abuse against older women come from many different fields of expertise and their level of training can range from minimum of 8 years school training and some specific training with a duration of approximately

6 months (for carers) to university degrees and post university training for further specialization in the field of elderly care.

Most professionals need to have a university degree. The areas of intervention of these professionals are:

- Homes
- Hospitals
- Day centers
- Long-term care centers
- Elderly clubs
- Other elderly dedicated institutions

The professionals that are or should be involved in the field of violence/abuse against older women were identified as:

Social workers

- are trained to recognize and evaluate suspected situations of abuse
- take the lead in developing and implementing a case specific protection and care plan and advise potential victims of their rights, options and benefits.

Doctors, particularly general practitioners and geriatricians

- observe the signs and symptoms of abuse, in their home or during regular medical visits and obtain more data on the instances and severity of abuse, or observe a family dynamic that may raise the suspicion of abuse.
- report obvious or suspected abusive situations.
- can act as trainers for family members/caregivers on care methods or refer them to other professionals – such as social workers, home-care services, psychologists, etc.
- treat potential injuries, correct or introduce appropriate treatments that may reduce the risk of abuse (treating psychiatric symptoms or dementia for example).
- are generally trusted by the elderly and their families /caregivers.

Nursing staff

- identify signs and symptoms of abuse both in and outside the home of older people and observe the potentially abusive social dynamics.
- gather information on the circumstances of injuries or the situation of older people
- report suspected situations of abuse
- provide care of potential injuries and training for the families or caregivers.

The care staff working in medical or socio-medical institutions

- observe and report potential instances of violence and abuse since they tend to be closest to the patients, especially in the long-term care institutions

- observe the dynamic between residents or between residents and other care staff, and can report potential situations of abuse.

Managers of care institutions

- responsible with the ongoing evaluation of the hired staff, as well as with the procedural aspects of the care activities
- can observe or receive reports of suspected or obvious abuse, and are responsible with stopping the abusive situation, investigating the situation and deciding on the needed measures.
- are responsible with the ongoing training of the staff including the training related to violence and abuse

Ancillary care staff – physiotherapists, speech therapists, etc

- can observe the signs and symptoms of abuse and report them

Psychologists

- can observe the signs and symptoms of abuse and report them
- can lead interviews with the victims
- support the victim of abuse/violence by using specific techniques
- can intervene in the case of the perpetrator

Law enforcement professionals

- can observe situations of abuse or receive reports of such situations
- report to the appropriate professionals
- investigate as part of the multi-disciplinary team
- develop and disseminate prevention materials

Trustees within the state services

- manage the cases of elderly without decision capacities

Pathologists

- evaluate suspected abuse injuries as well as the discerning abilities of the victim,

Priests

- can be aware of potential family issues and abusive situations
- have access to the homes of the elderly and can observe and report situations of elder abuse
- can be a psychological support for the potential victims

Lawyers, notaries, prosecutors, judges, the institution of the people's lawyer

- can advise potential victims of their rights and options under the law
- can observe potential situations of abuse – financial abuse, property fraud, emotional abuse, etc., and report them to the appropriate authorities
- can support the elderly with legal counsel in order to prevent situations of abuse
- can implement protective measures
- can put in place measures of protection for incapacitated victims
- can impose certain types of services for the perpetrators
- can request inspections in institutions of care if abuse is reported by beneficiaries

Currently in Romania there is no institution in charge of training activities in the field of violence/abuse against the elderly in general or women in particular.

Professionals are not trained during their formative years or on the job in the field of violence / abuse against older women as part of their official training and the only existing courses are the ones organized and held by the NGO's.

All participants consider this type of training as being absolutely necessary in their daily work and consider that such training should become mandatory for all professionals identified above, as part of their compulsory training as well as part of their continuous training since most institutions are required to continuously train their staff and most professionals require a certain amount of formal training per year in order to practice (doctors, nurses, clinical psychologists, etc.). The minimum of information that needs to be included in the training are:

- recognizing the signs and symptoms of violence/abuse,
- the steps that need to be followed in reporting violence/abuse depending on the position the professional is in,
- the rights and obligations of each profession in reporting situations of abuse and
- the human rights of older people.

The main institutions that should be involved in developing and implementing such training courses should be universities, professional high-schools, VET providers, professional boards of certain professions and NGOs that are active in this field.

Once a training structure would be in place a frequency of retraining would also be set, a suggestion would be a yearly retraining or as needed, depending on the work environment and the professionals being trained.

With regards to designing a training format, the participants suggested that a modular format for such a training topic would suit best the training needs of the professionals identified at the beginning of this document.

Each category of professional would cover a different number of modules, some that are basic and applicable to all professionals (such as signs and symptoms, reporting obligations), some that are specific to their specific training (such as the social rights of such victims, or specific psychological or medical interventions) and some that may overlap for more than one professional (like the correct reporting pathway that needs to be followed by professionals suspecting situations of abuse).

Ongoing training should be focused on refreshing relevant data, including new knowledge and addressing particular situations encountered in the day to day activities of the professionals.

Basic training should ensure that the professional is able to recognize and correctly report potential situations of abuse, and understands the impact of the abuse on the elderly.

The best teaching method was considered the face to face training that relies on theory as well as discussions of case studies, role play or dramatic arts such as themed plays.

The evaluation of training was considered absolutely necessary and in the opinion of our participants they should consist in evaluation questionnaires for both professionals and their beneficiaries, including phone calls to beneficiaries in order to avoid bias. The professionals should also be actively observed in their work. Official evaluations should be done either monthly or every three months.

Currently there are no evaluation methods for such trainings since such specific trainings are extremely rare.

The first step in developing the professional competences for the professionals identified as working in the field of abuse would be developing such training courses for them. Unfortunately currently there are no policies of developing such training courses.

Several barriers were identified by the participants in developing such training – particularly the lack of funding for such trainings, the lack of time, as well as a lack of specialized trainers.

Budgeting suggestions were – accessing European funding for training activities, partnerships with NGOs in different training activities, receiving private funding for such activities.

Policies to be developed should include issues as

- developing such training as part of the formative training of all professionals
- a mandatory amount of training time per day/month for all professionals (1h mandatory training per day).
- actively involving professional boards in requiring such topics for the mandatory trainings required on a yearly basis.

Recommendations:

- training on the issue of abuse against older women must be developed and become mandatory for all professionals as part of their compulsory training as well as part of their continuous training
- educational institutions (universities, professional high-schools, VET providers), professional boards and law enforcement institutions should be involved in developing such training
- basic training should ensure the ability to recognize and correctly report potential situations of abuse and understand the impact of abuse on the elderly.

- the training should be developed in a modular format in order to meet the training needs of the professionals.
- training methods should combine theory with discussions of case studies, role play or dramatic arts such as themed plays.
- the evaluation of the training should consist in evaluation questionnaires for both professionals and their beneficiaries and active observation at work. Official evaluations should be done either monthly or every three months
- funding for training should be accessed through European funding for training activities, partnerships with NGOs in different training activities, as well as private funding for such activities.

Theme 2: Development of inter-institutional cooperation and work relations in each country and between institutions inter-countries at EU level in the field of violence / abuse against older women and for ensuring integrated services in the same field

The participants identified the Romanian institutions that could be involved in an inter-institutional network at a local and national level as state run institutions or private organizations.

State run institutions are financed by the state or local budgets, while private institutions and NGOs can be financed by private sources, European funding through projects, state funds or private donations.

The institutions identified are:

- The Local and the National Police – in charge of prevention, ensuring safety and the enforcement of the law. They can be contacted directly, by phone and/or e-mail and target the entire population.
- Healthcare system – with hospitals and ambulatories, as well as the general practitioners working directly in the communities. It serves the entire population and institutions can be contacted directly, by phone and/or e-mail.
- Social services – local, regional or national – in charge of providing socio-medical services to vulnerable populations including the older people. They can be contacted directly, by phone and/or e-mail and target the entire population, particularly those in risk categories.
- Dedicated NGOs that work in various fields of expertise like home care or day centers or psychological support – these can act at a local, regional or national level. They can be contacted directly, by phone and/or e-mail and target specific parts of the population.
- The Guardianship authorities – as protectors of the older people that are lonely or at risk of abuse and abandonment. They can be contacted directly, by phone and/or e-mail and target the categories that require state guardianship for various reasons.
- Institutions of faith – actively involved in community life. They can be contacted directly, by phone and/or e-mail and target the entire population.

- The Notary union – as an institution that among other obligations, is responsible with counseling the older people in matters that fall under their responsibility. They can be contacted directly, by phone and/or e-mail and are available to the entire population
- The institute for forensic medicine – as a pivotal institution in the investigation of suspected elder abuse. They can be contacted directly, by phone and/or e-mail and they are available to those requiring forensic examination.
- Other law enforcement institutions – the people’s lawyer, prosecutors, attorneys, etc. They can be contacted directly, by phone and/or e-mail and target the entire population.
- Health ministry, Work ministry, Justice Ministry – as ruling bodies over medical, social and judicial institutions. They can be contacted directly, by phone and/or e-mail.
- Pensioner’s federation – working at a national level with pensioners. They can be contacted directly, by phone and/or e-mail and target the pensioners.
- Other private institutions aimed at helping and providing support for the older people. They can be contacted directly, by phone and/or e-mail and target the elderly.
- The Romanian Institute for Human Rights – experts in human rights. They can be contacted directly, by phone and/or e-mail and target the entire population.

At a European level the participants identified Age Platform as a potential participant to such a network.

In attempting to create such a network, the participants suggested developing a particular service within the Ministry of Justice or the Ministry of Labor that would centralize a list of the targeted local, regional and national institutions and would manage the process of contacting these institutions to invite them to join the network and would explain the objectives and benefits of establishing such a network.

This service would also make sure that the process of requesting, collecting and publishing the data received from the members would respect all data privacy legislation.

The participants suggested that the multi – institutional network should be created as an online site with a data base containing the information provided by the member institutions or an online site containing a map of all services at a national level with links to the institutional sites that would be required to present their data in a way that is consistent with the requirements of the network.

The professionals considered that the following data need to be collected from each institution:

- Full contact details including the contact details of all applicable branches of the institutions.
- A clear description of provided services and the requirements to accessing these services, including the documentation needed from the person needing these services.
- If applicable, an updated number of available beds/places/etc.

The participants also considered that since part of the general public that may need the data provided by the network, may be unable to access it in an electronic format, a paper format of this information, adapted to specific areas, should be available in the locations of the

public institutions (mayor's office, GP, church, etc.) in order to reach this segment of the population.

The main barriers identified were the lack of such a service, as well as the absence of a policy in this direction.

The participants believe that if such an initiative would be initiated the contacted institutions would cooperate since they feel there is a real need to improve multi-institutional cooperation.

Participants suggested that the best way to encourage and foster communication and cooperation is to create a formally established multi-institutional network, managed by a dedicated service preferably a part of the Ministry of Justice, Ministry of Labor or as an inter-ministry institution.

This formal body would need to establish the following:

- the type of network that would be established as well as its official organizational structure
- the main goals of the network as well as a code of conduct applicable to all members (including sanctions)
- governing bodies
- targeted institutions
- online vs physical community,
- free access vs restricted access database,
- online site vs limited access online data-base,
- clear procedures regarding the collection, storage and dissemination of member information as well as all other data provided by members for further dissemination within or outside the network.
- a clear procedure on communicating relevant data, inside and outside the network (written format is considered the best solution)
- a clear adherence procedure for the institutions that would become part of the network,
- a clear inter-institutional collaboration procedure
- standard information that would be required from all adhering institutions as well as the frequency with which this data will need to be updated depending on the data.

This would create an appropriate framework and would be a first step in of organizing this type of inter-institutional network.

The participants suggested that the best way to ensure a succesful long term management for such a network, it would be best if the network itself would be organized by dedicated body that should be part of an official body such as the Ministry of Justice.

Once established, our participants consider that the network needs to organize and host at least two network meeting per year and if needed other meetings dedicated to specific projects, specific themes or formal trainings.

The network and the meetings should also be used as a platform for initiating projects, identifying partners and disseminating good practices, project results and other relevant details.

The network could also serve as a platform to provide the appropriate support for members and to help members connect. Aspects as legal issues or particular practical situations could be discussed as a group and members would benefit from the expertise and previous experience of other members or other institutions.

With regards to providing a service to the general public, our participants suggested that the network should also create a phone service that would serve in supporting the general public in identifying the appropriate institutions that have the required services that may assist them with their issues including legal, medical, social services and psychological advice.

The main barriers in developing such a network that were identified by our participants are:

- making a good enough argument for the creation of this network
- the lack of political will and political instability
- institutional resistance to change
- fear of responsibility and fear of new ideas
- the need to finance and train professionals
- personnel turn-over
- financial support from the state

Recommendations:

- The network should be state run
- It should encourage public – private cooperation
- The network should be a platform for developing relevant European projects as well as encouraging members to participate in such projects. This could be an alternative source of funding for the organizers and managers of the network
- The network should have a clear evaluation process for both member activity as well as the impact of the network (solved cases, number of accessed services as a result of accessing the network) through procedures of statistical analysis.
- The network can become an important training platform for professionals and the general public.

In conclusion, the CLGs participants consider developing such a network as a step forward in improving the cooperation between the institutions involved in the care of the elderly and in particular in cases of abuse and violence against older people, since these can be complicated and difficult to manage. Peer support and the dissemination of relevant data would be the main benefits for professionals working in this field.

Recommendations:

- developing a state-run service within the Ministry of Justice or the Ministry of Labor that would organize and manage the development of an inter-institutional network.
- the network should be created as an online site containing a data base of the specific set of information collected from all members.
- data should be available to the public both in electronic and paper formats and should be available through a phone service.
- the network should have regular meetings and to be a platform for developing projects, providing training, disseminating good practices as well as current and relevant information.

Theme 3: Adopting effective and adapted prevention measures in the field of violence/ abuse against older women

In Romania, the main state run institution that has an active role in the prevention of elderly abuse and violence is the Police, through the Prevention service that employs dedicated specialists. The activity of this department targets the general public, but has preventive activities targeting the safety and security of the elderly, including protection from all forms of abuse. The institution also collaborates with social services institutions in order to disseminate the preventive information.

The main topics of the prevention activities relate to financial abuse or theft done by strangers that target the older people because they are more vulnerable.

The Police also disseminate preventive data in collaboration with other institutions such as the public transportation service in Bucharest by displaying preventive information related to elder abuse either in paper format or in video format in the buses, trams or metro, in order to reach as many older people as possible as well as their families.

Still this service is understaffed and is not dedicated the elder abuse prevention.

Some NGOs that are involved in working with the elderly organize preventive actions with the help of police officials, but they are only occasional.

Individual professionals in their daily practice can undertake preventive activities on a case to case base and in their field of expertise but this is not a specific institutional requirement.

In current practice the following aspects are currently missing:

- Adapted services
- Specific legislation
- Trained professionals including lawyers
- The following measures need to be created:
 - Create a specific legislative framework to protect the victims of abuse
 - Create a dedicated institution or service that deals exclusively with preventive work in the field of elder abuse
 - Creating adapted preventive services – trainings, etc.
 - Provide finances to develop prevention activities
 - Hire and train dedicated personnel

- Organize inter-institutional meetings to identify best practices and develop collaboration protocols
- Raise awareness in the general public on this issue
- Involve volunteer work in prevention activities

What professionals should be involved ? What institutions should be involved ? The following professionals and the institutions they represent should be involved in preventiv eactions :

- Police officers
- Doctors and especially GPs
- Nurses
- Carers
- Social workers
- Community nurses
- Priests
- Notaries
- Lawyers, attorneys, prosecutors, etc.
- The best implementation strategies for the newly designed or updated methods are:
 - Workshops
 - Using the media to disseminate the strategy and services created – TV, Radio, magazines, papers
 - Creating and disseminating other types of informative materials – posters , flyers – that can be disseminated in selected institutions.

The monitoring and evaluation of services should be done on a continuous basis through:

- Feed-back from professionals and the general public
- Statistic evaluation of specific items – such as reported cases, rate of abuse/violence, number of solved cases
- Polls or sociological studies within the general population or the professional community on the efficacy of such measures
- The participants identified the following budgeting sources for preventive activities:
 - State budget
 - Local budget
 - European projects ran by state institutions or NGOs

The main possible barriers identified were lack of funding and prejudice related to elderly abuse/violence.

The possible solutions identified by our participants were developing prevention services and trainin gactivities and encouraging inter-institutional collaboration.

Lastly the types of policies that could be formulated and adopted

- Developing adapted legislation in the field of elder abuse that would clearly define abuse and violence in the case of the older persons
- Improving current elderly legislation and clarifying application norms.
- Developing a strategy on older people care that would include abuse/violence prevention
- Develop training policies in the field of elder abuse

Recommendations:

- Creating a specific legislative framework to protect the victims of elder abuse as well as improving current elder legislation and clarifying application norms.
- Developing a strategy on older people care that would include abuse/violence prevention
- Develop training policies in the field of elder abuse
- Creating a dedicated institution or service to develop preventive work in the field of elder abuse as well as adapted services.
- Hire and train dedicated personnel in institutions that care for the older people
- Organize inter-institutional meetings to identify and disseminate best practices and develop collaboration protocols
- Create awareness campaigns on the issue for general public
- Involve all identified professionals as well as volunteers in prevention activities
- Use various methods of dissemination for preventive materials – meetings, media, paper based, electronic, etc.
- Continuous impact monitoring

Portugal

Legislative context

The main laws regulating the instances of violence and abuse against women in Portugal are:

- The Criminal Law - Decree-Law no. 48/95, 15th March, amended by Law no. 44/2018, 9th August and the Criminal Procedure, Law Decree-Law no. 78/87, 17th February, amended by Law no. 33/2019, 22nd May
- Law that regulates the conditions for the organization and operation of care facilities, emergency response and shelters within the national support network for victims of domestic violence, Regulatory Decree no. 2/2018, 24th January
- Regulation of the retrospective analysis of homicide in the context of domestic violence, Ordinance no. 280/2016, 26th October
- Victim Status establishing minimum standards on the rights, support and protection of victims of crime, Law no. 130/2015, 4th September

- Law that approves the Convention on preventing and combating violence against women and domestic violence, Resolution of the Assembly of the Republic no. 4/2013, 21st January
- Law that establishes the criteria for granting victim status by the Commission for Citizenship and Gender Equality to victims of domestic violence, Order no. 7108/2011, 11st May
- Law that regulates the establishment, operation and exercise of the committee on the protection of victims of crime, Decree-Law no. 120/2010, 27th October
- Documentary evidence of victim status, Ordinance no. 229-A/2010, 23rd April
- Law that establishes the conditions of initial use of technical means of remote assistance, Ordinance no. 220-A/2010, 16th April
- Law that defines the requirements and qualifications required to train victim support technicians, Order no. 6810-A/2010, 15th April
- Law that establishes the legal regime applicable to the prevention of domestic violence, the protection and assistance of its victims. Law no. 112/2009, 16th September, amended by Law no. 24/2017, de 24th May
- Compensation scheme for victims of violent crime and domestic violence, Law no. 104/2009, 14th September, amended by Law no. 121/2015, 1st September
- Exemption from healthcare fees for victims of domestic violence, Order no. 20509/2008, 5th August
- Law that creates a virtual platform for criminal reporting, Ordinance no. 1593/2007, 17th December
- Law for the protection of women victim of violence, Law no. 61/91, 13rd August
- Law that ratifies the convention on the elimination of all forms of discrimination against women, Law no. 23/80, 26th July

Theme 1: Development and consolidation of professional competences through adapted training for different categories of professionals working in the field of violence / abuse against older women

The participants identified the following professionals that work in the field of violence/abuse against older persons:

- Multi-disciplinary teams (EPVA teams) working on the prevention of violence between adults in certain institutions such as healthcare facilities.
- Healthcare professionals
- Psychologists
- Social workers
- City hall employees
- Private associations for the support of victims
- Law Enforcement Agencies
- Judges and Public prosecutors
- Private Social Solidarity Institutions

Training on the topic of adult violence in Portugal is currently done by the following institutions:

- Healthcare institutions

- APAV
- Social Security
- Local councils
- Private institutions

Specific training on elder abuse is rare in Portugal. Training needs and training methods were described as follows:

- Training based on a curriculum should be, in part, common for all professionals
- Training should improve knowledge on legal aspects and procedures applicable to new cases
- Elder abuse as a topic of learning (identification, prevention and treatment) is not included university training programs such as Law, Nursing, Medicine, Psychology and other significant areas of specialization.
- Training similar to the one provided by the SAFE project should be implemented.

With regards to training policies, the participants shared the following:

- Currently, in Portugal there are no specific training programs where professionals from different areas of specialization can be trained and share their perspectives on this issue.
- Training programs should be taught trainers with specific knowledge on the issue and pedagogical competence
 - Training programs should be regular
 - Specific training should be part of gerontology training programs

The obstacles to the training are both cultural and institutional.

Cultural obstacles are the result of the fact that professionals do not have specific training on this issue, and their lack of knowledge may have a negative impact on their work.

Institutional obstacles are present mainly when the organizational culture is geared towards meeting goals and achieving high productivity.

The detection and intervention in cases of elder abuse could be a performance indicator in healthcare facilities.

The participants identified the following resources for training activities:

- Application for grants
- Partnership with universities

Recommendations:

- Compulsory basic and ongoing regular training on the topic of elder abuse and neglect, including the legal implications of such acts, should be developed for the identified professionals.
- Hiring professionals for certain services (residential facilities, unities of long care, etc.) should depend on having been trained specifically on prevention and intervention in elder abuse.

Theme 2: Development of inter-institutional cooperation and work relations in each country and between institutions inter-countries at EU level in the field of violence / abuse against older women and for ensuring integrated services in the same field

The institutions dealing with cases of violence / abuse against older women, at local, national and European levels that were identified by the participants are:

- EPVA teams; City Councils; Healthcare institutions; Private Social Solidarity Institutions
- Government; DGS; Public Prosecutor; Law Enforcement Agencies; Social Security; APAV; CIG; Caritas
- European Court of Human Rights; WHO and INPEA at an international level
- National and European institutions analyze the phenomenon at a global level and disseminate policy orientations.
- Local organizations have different roles and lack inter-institutional cooperation.

Recommendations:

- Developing cooperation between the public health system and private medical services on this issue.
- Developing procedures to allow for the sharing of relevant information between and within institutions.

Theme 3: Adopting effective and adapted prevention measures in the field of violence/ abuse against older women

Currently, in Portugal, very few institutions are devoted to promoting the prevention of elderly abuse. One example is APAV. There also some community patrolling programs that have shown results.

The available preventive measures are:

- Flyers created by public institutions
- Mass media coverage of violence cases and
- Increased levels of training on this issue for professionals

Among the missing measures that should be created and implemented, the participants mentioned:

- A national plan for elder abuse/violence prevention
- A multidisciplinary approach to professionals training
- A procedure to share information between and within institutions
- More public awareness
- Further emotional and legal support to victims
- Introduction of this topic in the school curriculum of young people
- Electronic platforms where elderly could seek help, ask for advice or share ideas

These measures should be taken with the support and involvement of schools, universities, healthcare facilities, private social solidarity institutions, local councils, law enforcement agencies and government.

The following policies should be formulated and adopted in the field of prevention of elder abuse, in the opinion of the participants:

- Introduction of this topic in the school curriculum of young people
- Intervention responses tailored to the specific needs of older people
- Intervention directed towards the aggressors.
- Clear guidelines for professionals on the prevention, identification and intervention in cases of elder abuse.
- Protection and support for professionals that act on these cases.

Recommendations:

- Developing a national plan for elder abuse/violence prevention.
- Implement multidisciplinary training for all professionals involved in managing abuse cases.
- Creating clear guidelines for professionals on the prevention, identification and intervention in cases of elder abuse.
- Protection and support for professionals that report and/or act on these cases.
- Create intervention guidelines that can be tailored to the specific needs of the older people.
- Developing further services providing emotional and legal support for the victims of elder abuse.
- Developing electronic platforms where the older people could seek help, ask for advice or share ideas.
- Create interventions and services that are meant to address the aggressors.
- Raising awareness among the general population about the rights of the older people and what entities to call in the case they are aware of elder abuse situations.
- Creation of an electronic platform for the (anonymous) reporting of abuse cases.
- Increase human resources to allow the implementation of prevention and intervention policies for elder abuse.
- Training professionals on their individual role in the public strategies for the prevention and intervention in cases of elder abuse and neglect.

Conclusions

Although the social, educational, institutional, economic and political contexts in the countries of the participating institutions can be significantly different, the collaborative learning groups provided a significant input on the discussed themes, based on which a series of recommendations can be made.

Theme 1: Development and consolidation of professional competences through adapted training for different categories of professionals working in the field of violence / abuse against older women

- Knowledge on violence/abuse against older women should be a mandatory part of the official training curriculum for all professionals involved in managing cases of elder abuse.
- The curriculum should be adapted to the learning needs of specific professionals.
- Educational institutions such as VET providers and Universities, as well as professional boards and any other relevant institutions should be involved in developing curriculum requirements and providing specialized training.
- Basic training should be followed by continuous education with various requirements based on the learning needs of professionals.
- Training needs to include various types of training methods, including experiential and practical methods, discussions of case studies, role play or dramatic arts such as themed plays.
- Basic training should ensure the ability to recognize and correctly report potential situations of abuse and understand the impact of abuse on the older people.
- Training should be monitored and evaluated on a regular basis
- Funding should be obtained from various sources – State funds, European funds, interprofessional training funds, grants, private companies funding or sponsorships for continuous training.
- Hiring professionals for certain services (residential facilities, unities of long care, etc.) should depend on having been trained specifically on prevention and intervention in elderly abuse.

Theme 2: Development of inter-institutional cooperation and work relations in each country and between institutions inter-countries at EU level in the field of violence / abuse against older women and for ensuring integrated services in the same field

- A mandatory centralized systematic data collection and analysis on elder abuse should be done by all social and health care services.
- Training professionals will encourage the development of organizations that address the issue of violence against the older persons / older women
- Institutions and organizations involved in managing cases of abuse / violence against older people / older women should establish an institutional network that would allow them to better manage the cases they are dealing with as well as to collect data on the real dimension of this social phenomenon.
- Raising awareness on the issue among the general public and more specifically among older people on the issue of abuse/violence against older women. Awareness would increase political support to develop such an inter-institutional cooperation network.
- An inter-institutional network should have a clear management system (possibly state run), a formal protocol for communication and cooperation, clear member roles and relationships.
- Within such a network, institutions can establish clear standardized intervention protocols, including guidelines that could be developed, approved and disseminated by professional boards

- The network could be created as an online site containing a data base of the specific set of information collected from all members.
- Collected data should be available to the public in electronic and paper formats and should also be available through a phone service.
- The network should have regular meetings and to be a platform for developing projects, providing training, disseminating good practices as well as current and relevant information.
- The network should encourage the cooperation with the legal authorities in order to ensure legal support for cases of abuse.
- Authorities should encourage the development of experimental local networks that could then be disseminated as a good practices example.

Theme 3: Adopting effective and adapted prevention measures in the field of violence/abuse against older women

- Adapting or creating a specific legislative framework to fully protect the victims of elder abuse.
- Developing a strategy on elderly care that would include abuse/violence prevention
- Develop training policies in the field of elder abuse for all professionals involved in managing such cases.
- Create a dedicated institution or service to develop preventive work in the field of elder abuse as well as adapted services.
- Creating a system of registering older women living alone or needing assistance within the community, in order to include them in a programme of regular wellness checks as well as provide close monitoring of known situations of addicted/mentally ill relatives living with older people. Developing electronic platforms where the older people could seek help, ask for advice or share ideas.
- Large, social-media based, awareness campaigns on the issue of violence against older women should be developed
- Screening programmes for the identification of elder abuse must be developed and used in all care services dedicated to the elderly.
- Training on screening tools for abuse as well as preventive activities should be developed for social and health care professionals as well as for management staff
- Encourage and facilitate reporting of abuse incidents as well as providing protection solutions. Protect reporters. Create clear deterrent measures for cases of abuse, for professionals including revoking the right to practice.
- Provide services of support for professionals as a measure of preventing burnout and potentially abusive behaviour.
- Ensure a safe intervention, by providing clear intervention guidelines – especially in the case of persons with cognitive impairments.

- Employing dedicated staff in elderly care institutions; require a mandatory check of criminal records and reference letters at the moment of employment in the private care sector.
- Disseminate best practices and develop collaboration protocols between institutions caring for the older people.
- Create an ongoing monitoring system of all preventive actions, in order to provide data for further change or improvement.
- Develop services providing emotional and legal support for the victims of elder abuse.
- Create interventions and services that are meant to address the aggressors.

Operational plan of measures on prevention and intervention in cases of violence against older women

Operational objective	Measure	Period of realization	Responsible	Resources	Indicators	Risks
Theme 1 Development and consolidation of professional competences through adapted training for different categories of professionals working in the field of violence / abuse against older women						
Training professionals on elder abuse/ violence against older women and providing clear intervention procedures	Mandatory adapted training on elderly abuse for all professionals in the care sector. Applicable to all VET providers training professionals in the care sector	By the end of the legislature	National /Regional authorities responsible for VET regulation	Potential additional human resources	The release of an updated training curricula that includes the subject of elder abuse /violence against older women	Lack of interest or sensitivity for the issue from the legislative bodies. Resistance and/or lack of skills among the organizations providing the training Lack of trainers on the subject
	Mandatory adapted academic training on elder abuse for all professionals in the social / health care / legal sector	By the end of the board mandate	Universities, other academic training institutions	Potential additional human resources	The release of an updated training curricula that includes the subject of elder abuse /violence	Lack of interest and sensitivity to the topic on the part of the educational boards of the institutions Reluctance/resistance

					against older women	In the short term, lack of competent human resources to create and implement the new curricula. Excessive bureaucracy in reorganizing courses and identifying the needed human resources Indirect costs Lengthy process
	Continous Professional Development training in elder abuse / violence against women becomes mandatory for all practicing professionals	By the end of the legislature	Regulatory bodies for care services Professional Boards	State funding EU funds Inter-professional funds Internal funds of the companies providing these services	In the regulatory framework, a bi-annual / annual certificate for all professionals will be mandatory	Lack of interest or sensitivity for the issue from the legislative bodies. Resistance and/or lack of skills among the organizations providing the training Lack of trainers on the subject General resistance of professionals to

						additional training requirements Prejudice and stigma around the topic
Operational objective	Measure	Period of realization	Responsible	Resources	Indicators	Risks
Theme 2: Development of inter-institutional cooperation and work relations in each country and between institutions inter-countries at EU level in the field of violence / abuse against older women and for ensuring integrated services in the same field						
Developing a centralized system for collection of data on cases of elder abuse	A national /regional registry of cases of elderly abuse	By the end of the legislature	Health and social services ministries	State funding	The correct use of the system Volume and accuracy of collected data	Resistance from authorities and targeted institutions Lack of human resources Lack of financial support
Creating an institutional network for inter-institutional collaboration	Establishing a service dedicated to organizing and managing a national/regional inter-institutional network	By the end of the legislature	Health and social services, ministries	State funding	Number of institutions joining the network Evidence of collaboration – meetings, contacts, disseminated data, partnerships.	Resistance from authorities and targeted institutions Lack of human resources Lack of financial support Membership issues, network management issues.

Operational objective	Measure	Period of realization	Responsible	Resources	Indicators	Risks
Theme 3 : Adopting effective and adapted prevention measures in the field of violence/ abuse against older women						
Creating/adapting the legislative framework that specifically addresses the issue of elder abuse /violence against women	Creating/adapting legislation to include elder abuse /violence against women	By the end of the legislature	Health and social services ministries and parliament	State funding	Number of laws and policy documents issued on the issue of elder abuse /violence against women	Resistance from policy makers Time consuming process
Developing a strategy on elderly care that would include abuse/violence prevention	Strategy for the older people that includes abuse/violence prevention	By the end of the legislature	Health and social services, ministries and parliament	State funding	Number of laws and policy documents issued on the issue of elder abuse /violence against women	Resistance from policy makers Time consuming process
Reporting of abuse is encouraged/instituted as professional obligation	Guidelines on how to deal with cases of elder abuse / violence against women are issued	By end of the current mandates of the boards	Professional boards of social workers – doctors – psychologists - nurses and lawyers	Dedicated resources should be found from dedicated grants or from the public sector	Guidelines for the different professional profiles are released	Difficulties in involving and coordinating all the necessary professionals / institutions The guidelines result as too abstract and/or generic

						<p>The guidelines are not disseminated nor applied by professionals</p> <p>Guidelines are not updated to respond to emerging needs</p> <p>Guidelines are implemented in a formalistic way</p>
	<p>A whistle-blowing legislation is introduced in residential care settings</p>	<p>Within end of the legislature</p>	<p>National parliament</p>	<p>No extra resources needed</p>	<p>The legislation is introduced</p>	<p>Resistance to introduction</p> <p>Poor or bad formulation</p> <p>Protection not as extended as needed</p> <p>Reporting can be used by workers willing to shed a bad light on the service / facility as form of revenge for other problems had toward the management</p>

						Difficulty in granting or accessing the protection provided Lack of implementation by the recipients
	Protocols are put in place between the Board of Social Workers and the Police to protect social workers reporting abuses	RR	Board of social workers and police	No extra resources needed	The protocol is signed	Resistance to introduction Poor or bad formulation Protection less extended as needed Difficulty in granting or accessing the protection provided Lack of implementation by the recipients Mutual distrust
	The network of GBV services becomes „age-friendly“	Within end of the current mandates of the boards	NGOs managing shelters and GBV services	Resources should be found from dedicated grants, from sponsorships, EU funds or	Services become more accessible to older women	Financial problems Resistance to change Ageism Lack of competent human resources

				from the public sector		
	Health care services for addiction and mental illnesses coordinates with local social services to monitor situations of patients living with older parents	Within end of the legislature	Local social and health care services	No extra resources needed	The procedure is put in practice	Problems related with data communication / exchange (privacy) Difficulty of involving and coordinating the different subjects Mutual distrust
	„Sentries” to detect cases of abuse are identified in each local „Area Plan” within civil society organizations	Within end of the legislature	Local social and health care services	No extra resources needed	The procedure is put in practice	Reluctance in taking up this role Misuse of the role
Raising awareness on the issue of elder abuse/violence against older women Disseminating good practices	Creating awareness campaigns	By the end of the legislature	State institutions – ministries, social services, etc., as well as NGOs involved	State resources, sponsorships, EU funds, other funding	The campaign is launched The number of people reached by the campaign	Lack of funding Ageism Lack of interest from state run institutions A small campaign with limited impact

			in preventive actions		Actions taken as a result	
Training on preventing abuse for all professionals involved in managing cases of elderly abuse / violence against women	Mandatory addapted academic training on elder abuse for all professionals in the social / health care / legal sector	By the end of the board mandate	Universities, other academic training institutions	Potential additional human resources needed	The release of an updated training curricula that includes the subject of elder abuse /violence against older women	<p>Lack of interest and sensitivity to the topic on the part of the educational boards of the institutions</p> <p>Reluctance/resistance</p> <p>In the short term, lack of competent human resources to create and implement the new curricula.</p> <p>Excessive bureaucracy, in reorganizing courses and identifying the needed human resources</p> <p>Indirect costs</p> <p>Lengthy process</p>
Changing employment	Adapting current employment legislation	Parliament	By the end of the legislature	State institutions – ministries ,	State resources	<p>Lack of funding</p> <p>Lack of interest legislators</p>

conditions for the private sector				social services, etc.		Resistance from employers
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The Operational Plan can be used to create and adapt measures to be proposed at a national level in EU countries.

