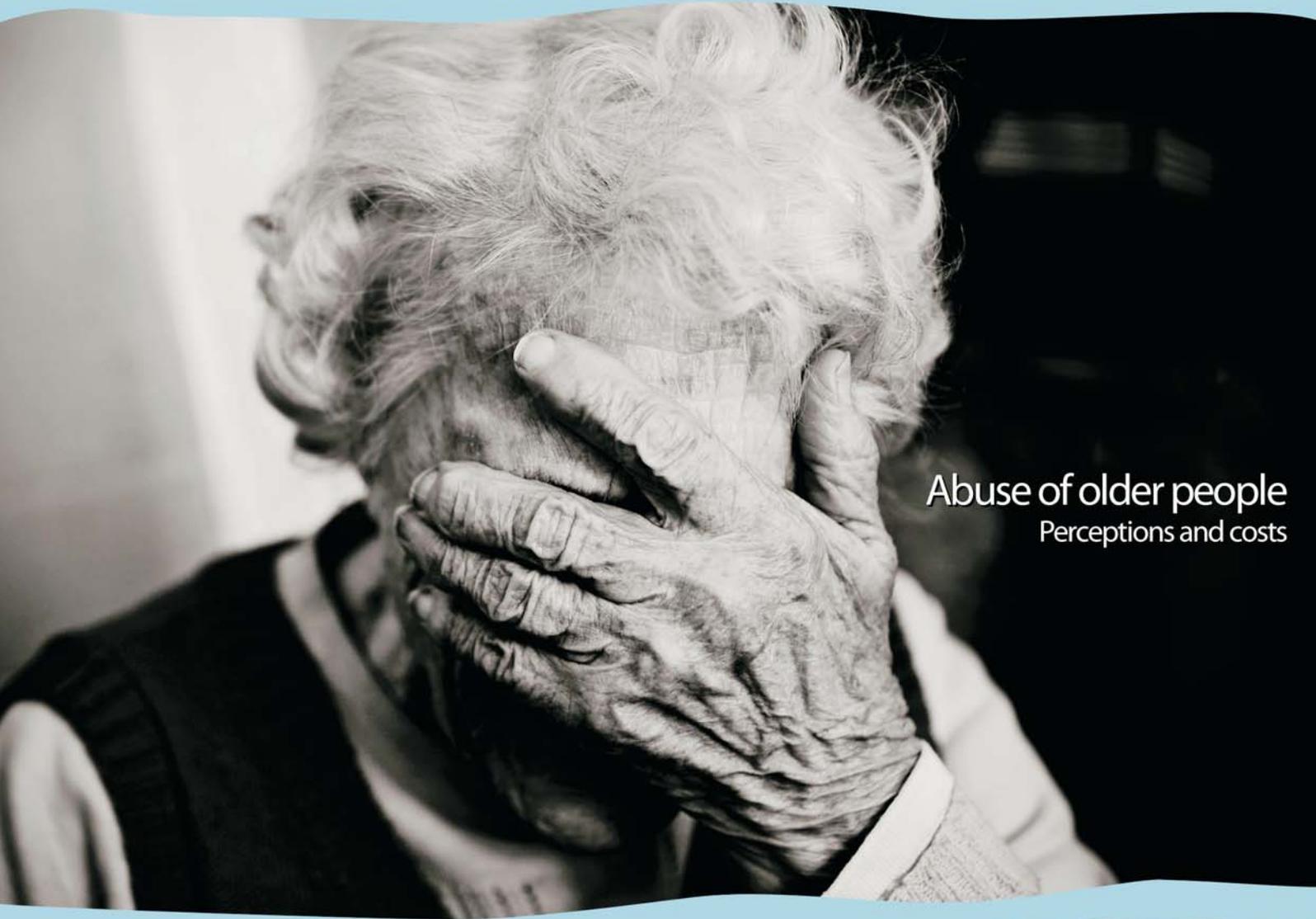


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CDFV Reader



Abuse of older people
Perceptions and costs

Policy initiatives:
Queensland Government strategy: For our sons and daughters

Training update:
Course in Responding to Domestic and Family Violence
Reflections on course delivery

Evidence based practice:
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Director's message

There has been much activity in the domestic and family violence policy arena, at both the state and national level, since the last edition of the Re@der. In Queensland, the Minister for Communities and Housing and Minister for Women, Karen Struthers, launched the Queensland Government strategy to reduce domestic and family violence, *For our sons and daughters*. This initiative is discussed on page 13 of this edition. The Queensland Government also recently released for community consultation, a draft Bill providing for a partial defence for victims who kill their abusers. This will be the subject of an article for the December 2009 edition of the Re@der.



Nationally, the focus has been on ensuring that the family law, child protection and domestic violence protection systems work effectively together to safeguard against violence. Each year in Australia, an average of 77 people are killed by an intimate partner, with the majority of victims being female, and perpetrators male. And, on average, 25 Australian children are killed by a parent each year. In 63% of these cases, it is their father and many of them are killed while on court-ordered access visits. In three out of five cases of child killing, the motive is unknown but where it is known, 21% are related to a 'domestic altercation' and nine percent to 'family breakdown' (Mouzos & Rushforth, 2003).

As a nation, our laws, policy and practice to deal with family breakdown and protection from violence are complex and complicated by jurisdictional structures. During the extensive national consultation in the development of *Time for Action*, members of the National Council to Reduce Violence against Women and their Children consistently heard about the high level of risk to the safety and well-being of women and children as a result of inconsistent and at times conflicting policy and practice across family law, domestic violence law and child protection law. In response to the results of its consultation and research, *Time for Action* specifically identified the need to:

Establish a reference for the Australian Law Reform Commission to examine present State/Territory domestic and family violence, child protection legislation and federal family law, and propose solutions to ensure that the inter-relationship in the application of these laws works to protect women and children from violence (p. 120).

In response, the Commonwealth Attorney-General, Robert McClelland, announced an investigation to be conducted jointly by the Australian Law Reform Commission and the New South Wales Law Reform Commission, in consultation with other states and territories. Mr McClelland said, "The primary aim of this work will be to address inconsistencies so as to ensure women and children are better protected under both Commonwealth and State laws." Sue Price, of Men's Rights Agency, responded to the announcement by claiming "that 15 years of progress in getting fathers and children to spend time together is about to be undone" (Overington 2009). If this work is to be seen as addressing 'rights', the right to safety and well-being must be given primacy over 'men's rights'. The completion of this work, scheduled for mid-2010, will follow two related, but separate initiatives. These are a review of federal family law court practice and procedure in the context of family violence, to be conducted by Professor Richard Chisholm; and the evaluation of changes to the Family Law Act, including the controversial provisions for a presumption of 50/50 shared-parenting, being conducted by the Australian Institute of Family Studies. Both of these initiatives are scheduled for completion by the end of this year.

Heather Rancarrow

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Centre news

This quarter CDFVR welcomes two new members to the team: Lynne O'Keefe Daly and Lesley Shippey who will be sharing the Education Officer position.

Lynne O'Keefe Daly

Lynne commenced work with CDFVR on 13 July. She has a background in education, teaching English as a second language originally to Vietnamese, Laotian and Kampuchean refugees at the Wacol Immigration Centre and the South Brisbane Resource Centre. Over the years she has continued to teach English to Australian immigrants. In 2005, Lynne spent six months living with her family in Ireland and during this time taught English to Polish immigrant workers. She has assisted in teaching literacy and numeracy to adults including women experiencing domestic violence, and in supporting tertiary social work and community welfare students with their academic work. Lynne's focus at CDFVR will be on the production of educational publications.



Lesley Shippey

Sharing the position of Education Officer, with Lynne, is Lesley Shippey. Lesley has spent many years as a teacher, working mostly with children and their families in the upper primary school sector. She has taught in Charleville in south-west Queensland, as well as in schools on the Gold Coast and in the Mackay district. During that time, she has been involved in literacy projects within those schools – particularly in the areas of staff in-service and curriculum development.



Training update

Reflections on course delivery, accredited training – The way forward

By Betty Taylor, Training consultant, TAVAN Institute

Responding to domestic and family violence can bring safety and hope to those who experience such abuse. How agencies respond can have the potential to change lives - either by giving victims the support and interventions they most need or by giving perpetrators of abuse clear messages of the unacceptability of their behaviour.

It is twenty years since the Queensland Domestic Violence Task Force produced its report, *Beyond These Walls*, which first brought the issue of domestic violence onto the public agenda in Queensland in a significant way. Since then, policy and funding initiatives have seen the expansion of women's shelters, the establishment of specific legislation, state-wide domestic violence-specific telephone services for both women and men, a state-wide network of thirteen specialist domestic violence services, counselling programs for women, children and men, a state-wide research centre, a limited number of behaviour change programs for perpetrators, as well as enhanced responses from government agencies including, but not limited to, police, court and health services.

While there is now greater awareness of domestic and family violence across service systems, there is often not consistency in how knowledge and skills are gained and applied. Appropriate and well coordinated responses which are delivered with consistency in application, are the cornerstones of best practice in responding to domestic and family violence.



Course participants Townsville

In the past, the development and provision of domestic violence training has been largely left to domestic violence workers, often without acknowledgement and/or specific resources for this. This training has often been agency specific in development and delivery.

The need for consistent accredited training, available across the whole of Queensland, has been recognised in several reports including the 2002 CEAVAW (Coordinating Efforts to Address Violence Against Women) Report.

In response to a strongly identified need, the Queensland Centre for Domestic and Family Violence Research has developed the first domestic and family specific accredited course: *Course In Responding to Domestic and Family Violence* (30629QLD). This provides a new era of training opportunities across Queensland.

The course comprises three units of competency:

CHCDFV301A Recognise and respond appropriately to domestic and family violence

DFVR1A Referring appropriately and effectively in response to domestic and family violence

DFVR2A Reflecting on work practice when responding to domestic and family violence

The implementation of this training has seen the delivery of the course over nine days, with each unit of competency delivered over three days. Participants who successfully complete all three units are awarded a *Statement of Attainment*.

The course has now been delivered in four locations across Queensland, starting with the pilot in Brisbane and moving on to Mackay, Townsville and South West Queensland. The training in the south west of the state has been rotated across three communities: St George and Roma, with the final unit of training to be delivered in Charleville in September. The delivery of the training has been a partnership between the Queensland Centre for Domestic and Family Violence Research, the Health and Community Services Workforce Council and Bremer Institute of TAFE.

To date, 100 people have enrolled in the course with 64 successfully completing all requirements of assessment. The south west course will be completed in September adding to these numbers. Of the 100 enrolling in the course, 30 people have identified as either Aboriginal or Torres Strait Islander. There are some participants who, for a variety of reasons, were not able to attend all three sessions and may be eligible to complete the course through attendance at future training or through application for Recognition of Prior Learning (RPL).

As someone who has been providing training for many years, I am continually excited by this course and the opportunity it provides to workers in a variety of settings. Having the same participants, who come together for nine days of training, effectively builds confidence, trust, co-operation and shared practice wisdom. The focus on group engagement has been particularly valuable in allowing Indigenous

participants to share their knowledge of issues within rural and remote communities. This has been an invaluable learning experience for all participants.

Feed-back from the training has been very positive across all sites with on-going recommendations for its continuance. Over the last twenty years, I have developed and delivered training to diverse audiences on a variety of themes. However, the delivery of this course has convinced me of the need for workers to be able to access training that is practical, grounded and consistent in content and delivery. It not only gives them knowledge but also allows them to explore and reflect on their practice, build new skills and learn to look after themselves as they provide critical

services to those affected by domestic and family violence.

It has been a pleasure to be involved in both the pilot and ongoing roll-out of this training and I thank the Queensland Centre for Domestic and Family Violence Research, the Health and Community Services Workforce Council and Bremer Institute of TAFE for their ongoing support.

Disclaimer: The Queensland Centre for Domestic and Family Violence Research welcomes articles from guest contributors. Publication of the articles will be at the discretion of the Director of the Centre. Views expressed in published guest contributions are not necessarily the views of the Centre.

Recognition of prior learning for Course in Responding to Domestic and Family Violence (30629QLD)

By Annie Webster, Education Project Officer, CDFVR

We are pleased to advise that the Recognition of Prior Learning (RPL) student and assessor toolkits to support the *Course in Responding to Domestic and Family Violence (30629QLD)* are now completed. The toolkits will be included in the training package for organisations that purchase the course through the Centre for Training Materials and sent out to trainers who have already purchased it.

The Australian Quality Training Framework (AQTF) has made it mandatory for Vocational Education and Training (VET) providers to offer RPL to each person who enrolls in a training course. CDFVR, in partnership with the Health and Community Services Workforce Council, has developed the RPL toolkits to ensure that skill measurement is consistent when delivered by a range of training organisations responding to RPL applications.

The student toolkit:

The RPL process begins when the student registers to take part in the course. Students indicate on their registration form that they believe they have the skills and knowledge equivalent to what they would learn in that particular unit of competency offered. Students may wish to RPL one or all three of the units of competency. The assessors will then provide them with a student toolkit, which sets out information about the RPL process, what to include in a portfolio of evidence, and what to do if they have gaps in their evidence. The toolkit is set out in a series of steps and gives the student a range of templates, tables and checklists to support their information gathering. This evidence is then provided to the assessor who follows the steps in their toolkit to decide whether the student has met the criteria required to be granted RPL.

The assessor toolkit:

When the trainer/assessor is advised that a student has registered to RPL one or more units of the *Course in Responding to Domestic and Family Violence (30629QLD)*, they will then make contact with the student to discuss the RPL process and arrange for them to receive the student toolkit. The assessor must ensure that evidence provided by the student is valid, sufficient, reliable, current, authentic and fair. The assessor toolkit provides a series of steps, checklists and mandatory, as well as optional conversation questions, to assist them to fill gaps between the evidence the student has provided and the evidence required to obtain the qualification. When the assessor is satisfied the student has provided them with all the evidence they can for each criterion, they will then make an assessment decision, record it and provide feedback to the student. The student assessment and recommendation are then submitted to the registered training organisation.

There are many benefits to seeking RPL. These include enabling people who already have the required skills and knowledge to achieve a formal qualification without having to complete additional training, encouraging workers to self assess the skills they bring to the workplace and allowing skill gaps to be identified. The student and assessor toolkits are clear, step-by-step guides to assist students to determine if they have the skills and knowledge required to seek RPL and guide their evidence gathering, and to ensure that trainers apply consistent methods to appraise student evidence. They support one of the main objectives for the development of the *Course in Responding To Domestic and Family Violence (30629QLD)* - to enable a consistent benchmark of skill and knowledge for all people who work with women subjected to domestic and family violence.

Research Summary

Abuse of older people

By Dr Liane McDermott (PhD), Education Officer, CDFVR

The Australian Network for the Prevention of Elder Abuse¹ (ANPEA) defines abuse of the elderly as "... any act occurring within a relationship where there is an implication of trust, which results in harm to an older person". Abuse may be *physical* (infliction of physical pain, injury or physical coercion); *sexual* (sexually abusive or exploitative behaviour ranging from indecent assault, sexual harassment to rape); *financial* (the illegal or improper use of an older person's property or finances); *psychological* (infliction of mental anguish, including actions that lead to fear of violence, isolation or deprivation and feelings of shame, indignity or powerlessness); or *neglect* (failure of a caregiver to provide the necessities of life, i.e. adequate food, shelter, clothing or medical or dental care) (Kurrle and Naughton, 2008). The ANPEA also includes *social* abuse (i.e. restricting or stopping social contact with others and stopping or restricting activities) as constituting another form of abuse. Abuse of older people can occur anywhere, in an older person's home or in an institution and may be carried out by family members, friends, paid workers, volunteer workers or professionals (Australian Network for the Prevention of Elder Abuse 2009).



Prevalence of abuse

Abuse of older people is a significant social problem in Australia as well as in other countries. In a systematic review of international studies on the prevalence of abuse or neglect among older people, Cooper et al. (2008) concluded that overall, approximately 6% of the older general population experienced some form of abuse in the past month and 5.6% of elderly couples reported physical violence in their relationship in the past year. In this review, Cooper et al. (2008) found that the prevalence of overall abuse in the general population of older people ranged from 3.2% to 27.5%. This reflects the difficulties and inconsistencies across studies in defining and measuring abuse among older people, as well as possible variations in abuse rates across cultures (Cooper, Selwood & Livingston 2008).

A national study in the UK of abuse and neglect of older people living in their own home, showed that 2.6% were mistreated by family members, close friends or care workers over the past year (Biggs et al. 2009). The predominant form of mistreatment was neglect (1.1%) followed by financial abuse (0.6%), psychological abuse (0.4%), physical abuse (0.4%) and sexual abuse (0.2%). Most of the mistreatment was carried out by a partner or spouse (51%) or by another family member (49%), 13% by a care worker and 5% by a close friend. Perpetrator characteristics varied by type of mistreatment, with neglect, psychological, physical and sexual abuse being most commonly perpetrated by partners, while the main perpetrators of financial abuse were other family members and care workers (Biggs et al. 2009).

To date, there has been no national study in Australia and there has been only one state-based study of the general population. In a telephone survey of randomly selected South Australians in 2000, 2.7% of the older population (65 years or more) were identified as victims of abuse (Dal Grande 2000). Psychological abuse was the most common form of abuse, followed by financial and physical abuse and neglect. Aged Care Assessment Team (ACAT) studies have found that around 5% of clients living at home are subject to abuse (Kurrle, Sadler & Cameron 1992; Livermore, Bunt & Biscan 2001). Both of these studies identified psychological abuse as being the most common type, followed by physical abuse.

Abuse reported to the Queensland Elder Abuse Prevention Unit Helpline in 2007/08 include:

The older man who is too scared to evict his 50 year old alcoholic son because he has bashed him before.

The 52 year old son who sold the family home for \$870k through the misuse of an enduring power of attorney forcing the mother, who is showing early signs of dementia, to move in with her daughter.

The grandson who moved in with his ill grandmother with an arrangement to provide some care for free board. He now has lots of friends over for parties where damage has been done to carpets and walls. The woman is very scared of her grandson who has started verbally abusing her. She locks herself in her bedroom most of the time.
(Jackson 2009, p.2).

¹ ANPEA recognises that the term 'elder' has specific meaning for Indigenous people. While the abuse of older people can occur in all communities, the term 'elder abuse' does not refer particularly to Aboriginal older people or leaders.

Risk factors

As Sanderson and Mazerolle (2008) highlight, there is very little research into the risk factors of abuse of older people. There is, however, some evidence for shared living arrangements between the perpetrator and victim, the victim's dementia, social isolation for the victim and/or family and specific characteristics of the perpetrator, including mental illness, hostility, alcohol abuse, and dependence on the victim (Sanderson & Mazerolle 2008). Risk factors may also vary depending on the type of abuse. In the UK study, women were significantly more likely than men to have experienced neglect and interpersonal abuse (physical, psychological, and sexual), although the prevalence of financial abuse was similar for both sexes (Biggs et al. 2009). In this study, a higher prevalence of mistreatment was also evident among those aged 85 and older (compared to 66-74 and 75-84 years) and among those who reported poorer health, with levels of neglect being highest among those reporting bad or very bad health. The likelihood of mistreatment also varied by marital status (9.4% among those separated or divorced to 1.4% among widowers) and socioeconomic position, with higher rates among those who had been in semi-routine and routine occupations (4.1%) compared to those who had been small employers and self-employed (0.1%) (Biggs et al. 2009).

While studies have shown that older women experience more abuse overall than older men, older women are also more likely to be the victims of domestic violence. Domestic violence can manifest as a continuation of long-standing wife abuse, as violence that starts only in old age or as violence that begins with a new relationship in later years (Straka & Montiminy 2006). The problem of domestic violence against women in their later years has fallen in the gap between the two research fields of domestic violence and elder abuse, so little is known about the extent and nature of this problem (Straka & Montiminy 2006). Furthermore, older women may be less likely than younger women to report domestic violence or seek help for a number of reasons :

- They have been socialised with more traditional attitudes and values, particularly in relation to gender roles, marriage and family.
- They may have greater financial dependence, as many older women may be deemed as less employable due to lack of work experience and ageism.
- They are more likely to have health and functional problems that make them dependent on their partner to care for them.
- They may provide care to a dependent, abusive husband and remain in that relationship due to a strong care ethic.

- They may be resigned to living in a situation of long-standing abuse and not realise that they have choices. (Straka & Montiminy 2006).

Under-reporting of abuse

While determining the true prevalence rate and the risk factors associated with the abuse of older people is difficult, there is consensus that the prevalence of abuse is generally underestimated, as some elderly people may be reluctant or unable to report abuse (Cooper, Selwood & Livingstone 2008). The reasons why older people may not report their experiences of abuse include:

- A lack of community and professional awareness about the problem
- A lack of identification of certain situations as constituting abuse, for example, where no physical violence is being experienced
- People may not know who will be able to help them - who do they report it to and what will they do?
- Victims of abuse tend to be quite isolated with the abuse occurring in the absence of others, so they may not be able to access assistance.
- Older people and professionals may be afraid that the consequences of reporting the abuse will place the victim in a worse position than they are currently in, such as being institutionalised.
- Older people may be ashamed that they are being abused by people they should be able to trust, such as close family members. They may not want to jeopardise important relationships with family or friends, or may fear retaliation from their abuser.
- Health professionals may lack protocols and procedures for addressing abuse. (Ellison et al. 2004).

Perceptions of abuse of older people

The perception of what actually is abuse may be another confounding factor in the recognition and reporting of abuse of the elderly. Research studies have examined perceptions of elder abuse among older adults themselves and general practitioners (Helves & Cuevas 2007) and among pre-hospital care providers (such as emergency medical services and police) and hospital-based care providers (Rinker 2007).

In the study examining perceptions of elder abuse among Australian older adults and general practitioners, Helves and Cuevas (2007) examined differences or similarities in the perceived severity of abusive scenarios between three groups of older adults (older caregivers, older care-receivers,

independent older adults) and general practitioners (GPs). Formal paid caregivers were excluded as the focus was on relatives, family or close friends providing care. Participants' perceptions of elder abuse were assessed via questionnaire using a number of abuse scenarios (including physical, psychological, financial, sexual and neglect), together with a five-point rating scale of mistreatment.

Examples of two of the scenarios were: a daughter forcing her 65-year old paralysed father to eat and take his medication; and a son who when drunk, yells at his father to kill himself so that he no longer has to care for him and can save his money. Considerable differences in perceptions of abuse were found across groups. GPs viewed all of the abuse scenarios as less severe compared to how the groups of older adults understood them. Among the three groups of older adults, caregivers generally perceived the scenarios as less abusive than the care-receivers and independent older adults. Other studies have also found caregivers to be less likely to view situations presented to them as abusive compared to dependent older adults (Anetzberger, Korbin & Tomita 1996).

There were differences in perceptions of severity for the different abuse scenarios. The groups of older adults perceived the severity of sexual abuse scenarios and neglect as more severe than the other scenarios. Consistent with the findings of other studies (Harnett 1997), females viewed the sexual abuse scenarios as more severe than did males (Helmes & Cuevas 2007). Despite financial exploitation being the most common form of abuse among the elderly, the perceived severity of financial abuse was quite low, with most of the older groups viewing them as either not examples of abuse or as only mild forms of elder abuse. The significant differences in the perceived severity of the abuse scenarios between GPs and older people as well as between the groups of older people themselves, suggests that strategies to counteract abuse of the elderly need to be tailored to specific types of abuse (Helmes & Cuevas 2007).

A study in the USA examined recognition and perception of elder abuse among pre-hospital and hospital-based care providers (Rinker 2007). The aims of this study were to determine the healthcare providers' exposure to elder abuse; their ability to recognise the physical elements of abuse and neglect; and to examine their perceptions of it. A total of 400 respondents completed a 20-question survey which assessed the demographic profile of the participants, their exposure to elder abuse or neglect in the past twelve months, as well as their knowledge, beliefs and attitudes in relation to it. (Rinker 2007).

Almost 39% of respondents had been associated with one to three cases of elder abuse or neglect in the past twelve months, while 51% reported no recognised exposure to elder abuse or neglect. Approximately 97% of respondents disagreed with the statement that 'abuse, neglect and domestic violence in the elderly are rare', and the majority (89%) knew that they were obligated to report cases

Perceptions of the severity of abuse vary.

of real/informed (or suspected) abuse or neglect to law enforcement or social services personnel. In response to questions about the signs and symptoms of abuse, 69% reported that 'bruising' could be used as an indicator and 71% believed that 'burns' could also be a sign of abuse. The presence of bedsores was considered to be an indicator of abuse or neglect for 84% of respondents and 93% believed that the elderly could suffer head and neck injuries similar to shaken-baby syndrome. While 69% stated that reports of sexual abuse by an elderly person is probably the result of an actual sexual assault, 32% stated that dementia, depression and altered mental status were probably the reasons for a reported sexual assault in an elderly patient (Rinker 2007).

Responses to the abuse of older people

In an overview of elder abuse and neglect in Australia, Kurrle and Naughton (2008) summarise national and state-based responses to the abuse of older people. There is no mandatory reporting of abuse occurring in community dwellings for older people, however there is compulsory reporting of sexual abuse and serious physical abuse occurring in residential care facilities. Incidents of such abuse are reported to the Office of Aged Care Quality and Compliance and to police in the state where the abuse occurs. While there is no nationally integrated system to respond to the abuse of older people, specific services have been developed in many states, while other states have emphasised the use of existing services and programs to deal with abuse. Aged Care Assessment Teams (ACAT), in particular, have been identified as an important resource in the assessment and management of cases of abuse, and most other agencies or service providers that have older people as clients have developed education and training programs and protocols for responding to cases of abuse (Kurrle & Naughton 2008).

In Queensland, the government's response to the abuse of older people has been provided through the Office for Seniors in the Department of Communities (Jackson 2009). Programs funded specifically to address abuse in Queensland include the Seniors Legal and Support Service (SLSS) Centres and the Elder Abuse Prevention Unit (EAPU). The SLSS Centres provide free legal and support

services to seniors in abuse situations. The EAPU provides state-wide training and awareness raising as well as an information, referral and support helpline for those experiencing or witnessing abuse of an older person (Jackson 2009).

Costs of abuse to older people

In 2007/08 financial year, the EAPU reported \$14 million was exploited from Queensland seniors. They estimate that \$97 million is a more realistic figure since most notifiers to the EAPU do not provide a dollar amount (Jackson 2009). The actual amount of exploitation of seniors would be much higher if other services such as private legal firms, police, courts, Centrelink, the Office of the Adult Guardian and SLSS Centres were taken into account, together with the financial abuse that does not come to the attention of any agency (Jackson 2009). Using a lowest prevalence rate of abuse of 2.6% and a highest prevalence rate of 8% and applying the EAPU estimated figure of \$97 million for 2007/08, Jackson (2009) estimates the amount of financial exploitation for older Queenslanders to be between \$1.8 billion and \$5.8 billion. As Jackson (2009) highlights, there are also other 'hidden' costs associated with all forms of abuse of older people, including costs to the health, welfare and other systems.

With population trends showing an ageing community, there are expectations that there will be an increase

in the prevalence of abuse of older people (Jackson 2009; Kurrle & Naughton 2008). In Queensland, it is projected that the number of people aged over 65 years will increase from 534,465 in 2008 to 889,855 in 2020 (Jackson 2009). If no progress is made towards reducing the prevalence rate, Jackson (2009) estimates that the number of victims will rise from 13,896 to 23,136 (using a 2.6% prevalence rate) or from 42,757 to 71,188 (using an 8% prevalence rate).

Summary

The abuse of older people is a significant and potentially growing social problem in Australia with our ageing population. While there has been no national study on the prevalence of abuse among Australia's elderly population, it is estimated that on average, 5% of older people experience some form of abuse. There is consensus that this prevalence figure is likely to be under-estimated given that much abuse remains undetected and unreported. A number of reasons for this under-estimation have been highlighted, including a lack of community awareness about the problem and perceptions about what actually constitutes abuse of an older person. While at a national and state-based level, a number of programs and services have been established to address the abuse of older people, there are many research gaps in understanding the true extent and nature of this critical social problem.

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Database highlights

Domestic and family violence database summary: Abuse of older people

By Dr Liane McDermott (PhD), Education Officer, CDFVR

Background

In this edition of the Re@der, the research summary discusses the significant social problem of abuse of older people. Studies estimate that on average, 5% of older people experience some form of abuse. However, as much abuse remains undetected and unreported, this prevalence figure is likely to be under-estimated.

Here we examine the domestic and family violence reported during the period 1 January 2007 to 30 June 2009 by new clients over the age of 65 years from the data collected by the Elder Abuse Prevention Unit (EAPU) for CDFVR's Domestic and Family Violence Database. The data does not represent the prevalence of domestic and family violence among older people in Queensland, but provides some insights into the nature of domestic and family violence for new client matters recorded by the EAPU, with a particular focus on gender differences.

For the period 1 January 2007 to 30 June 2009, a total of 201 new client matters were recorded for those aged over 65 years. The majority were female (77.1%, n=155) and non-Indigenous Australians (85.6%, n=172). Most of the clients had some form of disability as only 13.9% (n=28) were reported as having no disability.

The type of service provided was primarily recorded as 'other' (94.0%, n=189) and the primary reason reported for contacting the EAPU was the experience

of violence in a current relationship (98.5%, n=198). For just over one-quarter (26.4%, n=53) of new client matters, the violence was reported to the police and 16.4% (n=33) had a domestic violence protection order. There were no significant differences between male and female clients in whether or not they reported the violence to the police or whether or not a domestic violence protection order was in place.

Gender differences

Studies have shown that older women experience more abuse overall than older men, so here we consider some gender differences in the experience of domestic and family violence between older women and men.

Table 1 compares the type of relationship in which the violence occurred by client gender. The most predominant form of violence was the abuse of a parent by their child (63% for women and 61% for men). Overall, the percentages for the type of relationship in which the violence was experienced was relatively similar for women and men, apart from the following exceptions. A higher percentage of men experienced violence in a spousal relationship (23%) and in a relationship where they were receiving informal care (9%) compared to females (17% and 3% respectively), whereas more women (7%) experienced violence in a relationship where the grandchild was the perpetrator compared to men (2%).

Table 1 Type of relationship by client gender

Type of relationship	Client					
	Female (n=155)		Male (n=44)		Total (n=199)	
	%	No.	%	No.	%	No.
Spousal	16.8	26	22.7	10	18.1	36
Spousal (same sex)	0.6	1	-		0.5	1
Intimate personal (includes Dating)	1.3	2	2.3	1	1.5	3
Informal Care - providing care	1.3	2	2.3	1	1.5	3
Informal Care - receiving care	3.2	5	9.1	4	4.5	9
Family – parent / child respondent	63.2	98	61.4	27	62.8	125
Family – parent respondent / child	3.2	5	-		2.5	5
Grandparent / grandchild respondent	7.1	11	2.3	1	6.0	12
Other	4.5	7	2.3	1	4.0	8

NB: As more than one type of relationship could be reported, column percentages do not total 100.

Table 2 shows the gender of the perpetrator. It should be noted that for a few new client matters there were multiple perpetrators where gender was mixed or unknown. For both women and men who had experienced violence in a current relationship, the perpetrator was most commonly male. This was particularly so for female clients (65%) compared to male clients (55%).

Table 2 Gender of perpetrator

Perpetrator	Client					
	Female		Male		Total	
	%	No.	%	No.	%	No.
Male	64.9	98	54.8	23	62.7	121
Female	35.1	53	45.2	19	37.3	72
<i>Total</i>	<i>100.0</i>	<i>151</i>	<i>100.0</i>	<i>42</i>	<i>100.0</i>	<i>193</i>

As the most predominant form of violence was the abuse of a parent by their child (who may be an adult), table 3 examines the gender of the child perpetrator for these new client matters. While for both older mothers and fathers, a son was most commonly the perpetrator, this was particularly marked for older fathers, with 72% of abuse being perpetrated by a son compared to 57% for older mothers.

Table 3 Child to parent abuse: gender of child perpetrator

Child Perpetrator	Client					
	Female		Male		Total	
	%	No.	%	No.	%	No.
Male	56.8	54	72.0	18	60.0	72
Female	43.2	41	28.0	7	40.0	48
<i>Total</i>	<i>100.0</i>	<i>95</i>	<i>100.0</i>	<i>25</i>	<i>100.0</i>	<i>120</i>

In summary, domestic and family violence data collected by the EAPU for CDFVR's Domestic and Family Violence Database showed that the majority of new client matters for the period 1 January 2007 to 30 June 2009 were for clients who experienced violence in a current relationship, the majority of whom were non-Indigenous Australian women with some form of disability. The most common type of relationship in which violence occurred for older women and older men, was a child to parent relationship, followed by a spousal relationship.

Thanks are extended to the Elder Abuse Prevention Unit for the exclusive use of their data collected for CDFVR's domestic and family violence database.

National Indigenous Family Violence Prevention Forum 2010 Safe homes, solid families – Let's build on it!

On 26 August CDFVR met with its Aboriginal and Torres Strait Islander reference group and national forum partners, the Australian Institute for Aboriginal and Torres Strait Islander Studies (AIATSIS) and Charles Darwin University (CDU), to begin planning the 2010 National Indigenous Family Violence Prevention Forum. The three themes - children and domestic violence; abuse of older people; and domestic violence and homelessness were chosen in response to 2009 participant feedback. The forum title *Safe homes, solid families – Let's build on it!* was chosen to best reflect the three themes and proposed forum content.

For the national forum, CDFVR will be asking for expressions of interest for keynote speakers, panel presenters and yarning circle leaders. The expressions of interest form will be circulated via our email network but will also be placed on our website www.noviolence.com.au by the end of September. The deadline for expressions of interest will be mid-November, in time for the next meeting between CDFVR, the reference group and forum partners. If you would like any further information on the national forum please contact Annie Webster on 49407838 or a.webster@cqu.edu.au

Service spotlight

Time for grandparents program

Support for grandparents raising their grandchildren
By Julie Argeros, Coordinator Older Persons Programs, Lifeline, Brisbane

In families where grandparents are the primary carers of children, there are often daily stresses and difficulties. In many cases family crisis has meant that grandparents take on the role of raising their grandchildren. At times, this can be sudden and grandparents may be unprepared for the arrival of their grandchildren. Lifestyle and school changes, financial hardship, family conflict, legal issues and the day-to-day care of traumatised children are just a number of difficulties that grandparents may face. Many of these families are not connected to services and support, and may be disconnected from their family, peers and other support networks.

In Aboriginal families, kinship connections and responsibilities mean that grandparents caring for their grandchildren can be a way of life. There is no second thought about who will look after the children and grandparents make no complaints. Grandfamilies however, often live under extreme circumstances in most community settings. Many grandchildren have experienced trauma, grief and loss, and commonly witness family and community violence.

Grandparents are faced with ongoing hardship raising their grandchildren, exacerbated by historical events, health, financial and housing issues to name a few.

Despite the hardships faced by all grandparents raising their grandchildren, grandparents are resilient and adaptable people who are determined to provide a safe, loving and supportive family environment for their grandchildren.

The *Time for Grandparents Program* is a Queensland wide program operated by Seniors Enquiry Line, a Lifeline Brisbane service funded by the Department of Communities. For eligible grandparents raising their grandchildren, assistance is available in the form of information and referral, and financial assistance for sports, recreational activities and school camps. Weekend camps for grandfamilies where accommodation, meals and transport are provided are currently being held in many areas of the state.

The aim of the grandfamily camps is to provide grandparents with the opportunity to spend some time on their own, while their grandchildren are being cared for and supported to participate in an exciting program of activities with trained recreational officers. Grandparents have the opportunity to meet other grandparents in a similar caring role and have access to qualified social workers and psychologists throughout the weekend to discuss personal and family related issues. A particular focus of the camps is skill development for caring under pressure. The caring under pressure sessions provide a framework for

understanding why grandparents may be feeling pressure in their caring role.

The sessions normalise the experience of stress/anxiety that grandparents may be experiencing as full-time carers, and seed the idea

that some problems are short-term and solvable and that it is worth allocating time to define the problem and develop an action plan to address it. Caring under pressure sessions validate that other problems simply have no easy solution and tend to take up grandparents' limited personal resources.

Grandparents are encouraged to take the time to care for their emotional well-being, and are provided with information about stress management techniques.

In January 2009, the *Time for Grandparents Program* conducted its first Aboriginal community camp with grandparents and their grandchildren from the Cherbourg Aboriginal community. Seniors Enquiry Line engaged the services of Aboriginal facilitators, and with the organisational support of the Cherbourg Community Health Service, grandfamilies participated in a weekend camp at Redland Bay. 'Respect for your Gran' underpinned the weekend for the grandchildren. Grandchildren were encouraged to reflect on the significant role that their grandparents play in caring for them and were provided with opportunities to demonstrate this. Grandparents yarned about their caring experiences, and were supported by the facilitator with information about self-care. Seniors Enquiry Line wishes to sincerely thank the Cherbourg community grandparents who participated in this camp. Their invaluable feedback, thoughts and insight will assist in the ongoing development of the grandfamily camp program. Seniors Enquiry Line is currently working with other Aboriginal communities in Queensland to provide grandfamily camps.

Grandparents who are the primary carers of their grandchildren and who are not receiving the fortnightly carers' allowance for Kinship Carers with the Department of Communities (Child Safety) are eligible for the *Time for Grandparents Program*.

For further information please contact the state-wide Queensland information and referral service, Seniors Enquiry Line on 1300 135 500 Monday to Friday between 9am and 5pm

Disclaimer: The Queensland Centre for Domestic and Family Violence Research welcomes articles from guest contributors. Publication of the articles will be at the discretion of the Director of the Centre. Views expressed in published guest contributions are not necessarily the views of the Centre.



Research summary

Mothers and the child protection system

By Dr Heather Douglas, Dr Tamara Walsh and K Blore
Summary by Lesley Shippey, Education Officer, CDFVR

This research highlights the feelings of confusion, intimidation and suspicion being experienced by many parents - especially mothers - when dealing with child protection departments. In this study, social, youth and welfare workers as well as community based lawyers, were asked to share their experiences of assisting mothers in their dealings with child safety authorities. Major issues identified concerned:

- a lack of information given to parents and a shortage of parent advocates
- the approach and inexperience of child protection workers
- the connection between poverty, homelessness and welfare intervention
- domestic violence.

Information and advocacy gaps

A recent shift within Australia's child protection departments from a family-centred to a child-centred focus has resulted in mothers not being fully informed of the details relating to interventions by child safety authorities. This research recommended the establishment of formal, carefully structured information-giving protocols to ensure that information is shared with the parent. The focus group agreed that mothers should receive assistance and support from an advocate at all stages of the intervention. The role of the advocate should depend on the individual family's circumstances and should focus on support, supplying information to relevant parties and negotiation. Whether an advocate needed to have formal legal training was debatable, but a good knowledge of child protection legislation was deemed necessary. It was recommended that extra training and resources should be available to parent advocates if required.

The approach of child protection workers

While the personal and professional pressures of working in the child protection system were recognised, an adversarial approach adopted by some workers often resulted in mothers being fearful of discussing child safety concerns with them. It was also perceived that many child safety officers are young university graduates who lack field experience and sensitivity to the needs of mothers in distress. In order to encourage women in need of assistance to confidently access child safety employees, a more collaborative, open approach is needed. It was recommended that changes be made to ensure that

inexperienced front-line child protection workers are well supervised and mentored by skilled, more experienced senior officers.

Poverty and homelessness

It was reported that the connection between poverty or homelessness and the removal of a child from its mother by authorities is very real. Confusion exists between the definition of 'abuse' and the inability of mothers to adequately provide for and protect their children for reasons of poverty alone. There existed a belief among workers that disadvantaged parents are neglectful and irresponsible, while in reality, many mothers have skills to lovingly care for their children but lack the material resources to do so. Among

practical suggestions offered were that intervention strategies should be focused on the individual mother's strengths and the provision of material and financial support to her. A clear definition of 'neglect' needed to be included in all documentation so that

mothers, who are unable to adequately care for their children because of financial distress, are not automatically labelled as 'abusers'.

Domestic violence

The research suggested that a lack of understanding of the dynamics of domestic violence by child protection officials resulted in holding non-violent mothers responsible for ending the violence. Women involved in domestic violence were often given an ultimatum to leave the relationship or lose their children, resulting in their reluctance to ask safety officers for support. Study participants suggested that training provided to child protection workers should be enhanced so that a greater understanding of domestic violence issues be gained. It was also suggested that an early response by police to domestic violence matters may result in battered women being able to access appropriate support and earlier protection.

In their conclusion, the researchers recognised the need for further research and review into the workings of the child protection system. They also stated that the issues raised in this research should be urgently addressed if mothers are to trust and engage with child protection workers so that their children are kept safe.

A complete copy of this report is available at: <http://www.law.uq.edu.au/documents/research/projects/child-protection-report.pdf>

Confusion exists between the definition of 'abuse' and the inability of mothers to adequately provide for and protect their children for reasons of poverty alone.

Policy initiative

For our sons and daughters: Queensland Government strategy to reduce domestic and family violence 2009-2014

By Heather Nancarrow, Director, CDFVR

On 10 July the Minister for Communities and Housing and Minister for Women, Karen Struthers, launched the Queensland Government strategy to reduce domestic and family violence, titled *For our sons and daughters*. The strategy was launched at the Rockhampton courthouse, where the Minister announced that Rockhampton would be the site of a trial integrated service response model as part of the strategy. The cross-government strategy is jointly led by Minister Struthers, the Minister for Police, Neil Roberts and the Minister for Child Safety, Phil Reeves.



(L-R) Mick Shearer, Regional Executive Director, Department of Communities; Assistant Commissioner Ann Lewis, QPS; Magistrate Annette Hennessy; Minister for Communities and Housing and Minister for Women, Karen Struthers; Paul Hoolihan, Member for Keppel; Linda Apelt, Director-General, Department of Communities.

The goals of the five-year strategy (2009–2014) are that:

- Communities promote respectful relationships and have zero tolerance of domestic and family violence
- Adults, children and young people experiencing domestic and family violence have access to effective safety and support programs
- People who use domestic and family violence are responded to early and are held responsible for their behaviour.

The strategy is built upon five areas of reform required to realise these goals: 1) prevention, 2) early identification and intervention, 3) connected victim support services, 4) perpetrator accountability and 5) system planning and coordination. Not surprisingly, these areas of reform are very similar to the six key outcomes identified in *Time for Action: The National Council's Plan for Australia to Reduce Violence against Women and their Children*, presented to the

Prime Minister in April 2009 (see CDFVRe@der Vol 7, No. 4 June 2009 for details). It is particularly pleasing to see the emphasis placed on primary prevention and early identification and intervention, while recognising the need to continue to improve victim support services and perpetrator accountability. Like *Time for Action*, the Queensland Government strategy recognises that “a more strategic approach to cross-agency planning, coordination and service delivery is needed” (p.11).

Each year the Queensland Government, in consultation with government and non-government partners will develop a program of action related to the areas for reform identified in the strategy. This will enable continuing reflection on progress and learning to inform future actions. This approach will also enable the Queensland Government to work collaboratively with the Australian Government and other states and the territories, through the Council of Australian Governments (COAG), on the development and implementation of a national plan to reduce violence against women. The Prime Minister has asked COAG to consider *Time for Action* and develop its national plan by 2010. The Queensland Government *Program of Action for 2009-2010* includes reference to such collaboration in the *system planning and coordination* reform area of its strategy.

The *Program of Action for 2009-2010* sets out various actions in each of the five reform areas and identifies the timeframe and government agency responsible for delivering the action. Some of these are discussed below.

In the first year of the strategy, *prevention* reforms include ongoing school-based initiatives, the development of a strategic communications plan to promote non-violent relationships in the broader community and the continuation of the annual Domestic and Family Violence Prevention Month. A community engagement initiative to develop a family violence prevention framework for the four Cape York welfare reform communities (Aurukun, Coen, Hopevale and Mossman Gorge) may also be included. The Department of Communities is responsible for the Cape York welfare reform initiative and it will work with an external consultant to deliver a draft plan to the Cape York Welfare Reform Project Board by the end of November 2009.

The Board is comprised of Chief Executive Officers of:

- The Department of Families, Housing, Community Services and Indigenous Affairs (for the Australian Government);
- The Department of the Premier and Cabinet (for the Queensland Government); and
- The Cape York Institute for Policy and Leadership.

Actions associated with *early identification and intervention* in 2009-2010 include an expansion of domestic violence screening across the ante-natal and post-natal period in Queensland Health settings, the distribution of a resource kit *Preventing and Responding to the Abuse, Neglect and Exploitation of People with a Disability*, and the introduction of a referral program for paramedics to enable them to more effectively assist victims of domestic and family violence.

The trial integrated service model announced by the Minister at the launch of the Queensland Government strategy sits under the reform area of *connected victim support services* and involves the Magistrates Court, victim support services, perpetrator programs and a case coordination team. The team comprises a specialist domestic and family violence worker, a police officer and a child safety officer. The trial integrated response model will be coordinated by a dedicated officer located within the Department of Communities and is expected to commence in November 2009 and run for eighteen months. Under this area for reform, the Department of Communities will introduce a safety upgrades program as well, to assist victims of violence to remain in their homes where it is safe to do so. This will be implemented on the Gold Coast, the Sunshine Coast and in Townsville in 2009. The program will also provide accommodation support, where needed, for people who have been abusive and are subject to an 'ouster' condition on a domestic violence protection order, requiring them to leave the home they have shared with their partner.

Within the area of *perpetrator accountability*, the Queensland Government strategy identifies a number of activities related to improving policing, as well as increased awareness for magistrates about the complexity of domestic and family violence and the establishment of a Justice Working Group. The purpose of the Justice Working Group is "to examine the links between domestic and family violence and the broader justice systems and provide input into the legislative review on issues such as supporting victims in court" (p. 7). This development seems to fit very well with the review of the inter-relationship between the family law and domestic and family violence and child protection law, being undertaken

by the Australian Law Reform Commission in conjunction with the state and territory law reform commissions, as recommended in *Time for Action* (see Director's message, this edition).

The Queensland Government strategy incorporates a focus on improved justice responses within the reform area of *system planning and coordination* including a comprehensive review of the *Domestic and Family Violence Protection Act 1989* and the establishment of a Domestic and Family Violence Death Review Panel. A Death Review Panel has been established for a period of six months and has met twice. Its primary objectives are to provide expert advice to the Minister for Community Services and Housing and the Minister for Police on:

- a) options for strengthening coronial processes and the coroner's capacity to comment on domestic and family violence issues, and
- b) options to identify systemic gaps and barriers to help prevent domestic and family violence-related deaths in the future, including models for an ongoing death review process.

The development of a code of practice to improve consistency and effectiveness of services for clients, and the development of a data collection improvement strategy and a strategic research plan are welcome innovations under the *system planning and coordination* area.

Overall, the Queensland Government strategy offers a number of innovations across critical areas for reforms. The development of an annual program of action enables further innovations based on progress made, the results of past programs of action and, hopefully, access to increased resources to prevent and respond to domestic and family violence.



Copies of *For our sons and daughters: A Queensland Government strategy to reduce domestic and family violence 2009-2014* and the accompanying *Program of Action 2009-2010*, both published by the State of Queensland 2009, can be found on-line at <http://www.communityservices.qld.gov.au/violenceprevention/>

Evidence based practice

Child to parent violence: Who, what & why?

by Annie Webster, Education project officer, CDFVR



On 1 July CDFVR hosted a distinguished visitor seminar presented by Eddie Gallagher titled 'Child to Parent Violence: Who, What & Why?' Eddie is a psychologist, social worker and family therapist and runs a private practice in Melbourne where he conducts regular counselling and group work for parents of violent young people as well as facilitating men's behaviour change groups.

Eddie commenced working with parents and adolescents over 17 years ago when it became apparent from his caseload that there was an increase in incidents. At that time, research indicated that adolescent to parent abuse was caused by bad or abusive parenting which was not consistent with what Eddie saw in his practice.

Adolescent to parent abuse is not a new phenomenon but an issue that has until quite recently been neglected for a range of reasons. These include:

- Parents, usually mothers, are blamed for their adolescent's behaviour
- Shame – both adolescent perpetrators' and parents' shame has contributed to a reluctance to report
- Labels attached to the abusive young person, such as 'victim of past domestic violence', 'disabled' or 'intellectually impaired', give parents a reason to explain the abuse away
- Viewing the problem in black and white terms - people are either victims or victimisers - when the reality is much more complex.

Eddie used an ad hoc clinical sample of 230 families, collected from a variety of sources, for a study aimed at understanding this phenomenon. The young people in the study were aged between 8-18 years and had either (a) repeated physical violence to a parent (90%) or (b) used verbal abuse and destructive behaviour or serious threats (10%). His research indicates that the biggest risk factors for adolescents associated with adolescent to parent abuse include:

- Being exposed to, or having experienced past domestic violence
- Being male
- Having a difficult personality (such as stubbornness; attention deficit hyperactivity disorder)
- Societal changes (such as influence of mass media; contempt for authority)
- Being in a family where parents have a high level of involvement but low level of control.

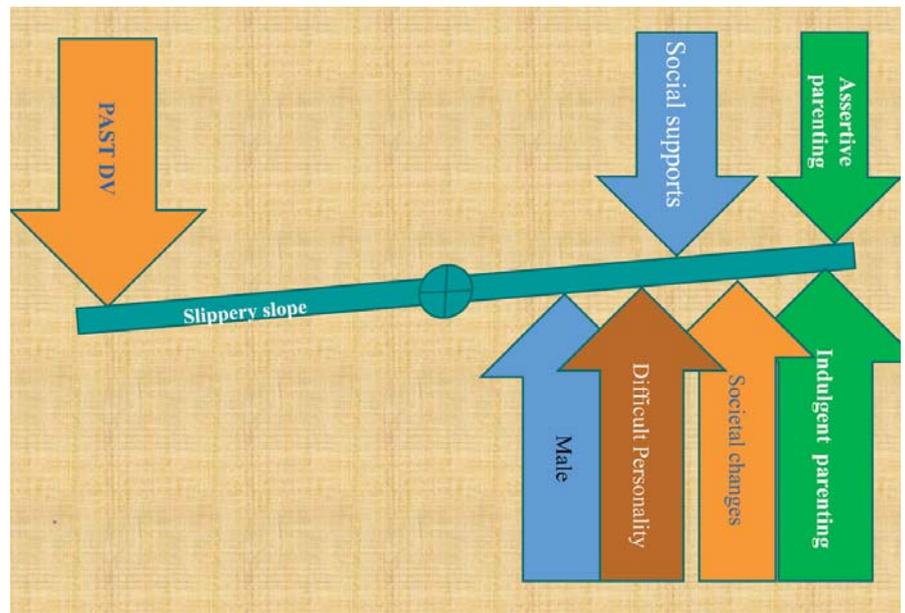
The gender breakdown in the overall sample of 230 families was the same across socio economic groups - 26% (60) of the abusers were female and 74% (170) male. Adolescents who had been exposed to past domestic violence accounted for 49% (113) of the sample. Research conducted by Cottrell and Finlayson (1996) and Cottrell (2001) explains that if adolescents are experiencing violence within their family and the abuse has become intergenerational, the violent behaviour may be considered normalised behaviour. The high incidence of abuse experienced by mothers was also consistent with earlier research. The following table compares the rate of abuse experienced by mothers and fathers per family type.

	Mothers only	Fathers only	Mothers and Fathers
Sole parents (n=133)	95% (126)	5% (7)	
2 parent families (n=98)	52% (51)		48% (47)
All families (n=230)	76% (175)	3% (7)	21% (48)

Fifty-eight percent (133) of adolescents in the study were from sole parent families and of those 133 families 95% (126) of the victims of abuse were single mothers. The remaining 5% (7) were mostly single fathers. Sixty-six percent of adolescents in sole parent families had been exposed to domestic and family violence. In two parent families 52% (51 of 98) of mothers were abused and 48% (47) of adolescents were abusive to both mothers and fathers. In the combination of single families and two parent families 76% (175 of 230) of mothers were subjected to abuse from their adolescent, 3% (7) of fathers and 21% (48) were abusive to both mothers and fathers. In this particular sample, girls in two parent families were more likely to be violent to their fathers 52% (14 of 27) than boys 40% (29 of 75). Anecdotal evidence suggests that some fathers are less likely to retaliate to a girl's violence because she is female. Eddie asserted that whilst female violence tends to be higher in the early adolescent years, it never reaches the level of violence attributed to adolescent males. This is supported by Eckstein (2004), whose qualitative/interpretive method showed that female abuse of parents escalates between the ages of 11-13 years and then diminishes.

Single mothers in the study who had experienced abuse from their partners expressed feeling worse after violence from their adolescent than when they were abused by their former partners. Adolescent to parent abuse breaks barriers of trust built up over many years and generally escalates from insolence and verbal abuse. Eddie explained that there were barriers to mothers in some separated families establishing a sense of respect when fathers came in and out of their adolescent's life and undermined their ex-partner's authority using contact situations to continue their use of verbal abuse. Even if adolescents disapproved of their father's behaviour to their mother, they were still victims of their attitude. Additionally, mothers' sense of guilt and their desire to make amends for subjecting their adolescent to violence precludes the practice of assertive parenting.

Eddie's clinical experience leads him to believe that not all violence perpetrated against parents is a result of modelled behaviour. There are strong influences of violence in the media, television and movies, which contribute to the enactment of violence. Attitudes are seen to be more important than modelled behaviour because they rely on adolescents' desire to control other people and the belief that they are entitled to do so. The increase in a sense of entitlement and decrease in respect is another factor that could contribute to the increase in adolescent to parent abuse. The research sample showed a disproportionate number of middle class families who over-indulge their strong willed child, or parents with a high level of involvement and low level of control.



Eddie's presentation emphasised the value of adopting assertive parenting styles, the risks of indulgent parenting and the importance of balancing responsibility with entitlement. Creating respectful relationships within families is critical to a reduction in the incidence of adolescent to parent abuse.

Further information on Eddie Gallagher's practice is available at <http://home.datacodsl.com/~eddiegallagher/violence%20to%20parents.html>

References:

Cottrell, B & Finlayson, M 1996, *Parent abuse: The abuse of parents by their teenage children*, The Family Violence Prevention Unit, Health Canada, Ottawa.

Cottrell, B 2001, *Parent abuse: The abuse of parents by their teenage children*, The Family Violence Prevention Unit, Health Canada, Ottawa.

Eckstein, N J 2004, 'Emergent Issues in Families Experiencing Adolescent-to-Parent Abuse' *Western Journal of Communication*, vol.68 pp. 365-389

Resource review

Home is where the hurt is, a training and resource package on responding to older women experiencing family violence

By Robyn Sedger

Summary by Lynne O'Keefe Daly, Education Officer, CDFVR

Older women experiencing violence are in a unique position in that the situations in which they find themselves are different in many ways to those of younger women, and often support services available to them have not always reached them.

The package *Home is where the hurt is, a training and resource package on responding to older women experiencing family violence*, is designed to improve advocacy and service delivery to the older woman. It is a comprehensive educational resource which, over the years, has proven to be well-received and easily adapted. An organisation can use it to deliver their own training program as it is easy to follow with very clear step-by-step guidelines. The trainer's module is fundamental to the package with well stated rationale, goals and objectives, program description and session outlines including a list of ideal trainer qualities.

The package is relevant to response teams in a range of settings from a justice perspective to aged care and can be used to address gaps in workers' knowledge. There are seven program sessions (with a recommended duration of 45 to 90 minutes) with content presented in detail. Recommendations for the physical environment, sample timetables, overheads and handouts are presented with very precise instructions to support even the novice trainer. The material has been formulated to give the training organiser a solid base from which to work. It is flexible and sessions can be tailored to meet the needs of specific groups, making the content relevant to the participant and providing new learning. The trainer can choose modules applicable to their particular group with the option of inviting other trainers to lead sessions in areas where their own specialised knowledge and experience are limited.

Sound definitions of the older woman and the factors at work for older women who experience violence are given, including the marginalisation represented in situations of isolation, disability, cultural and linguistic diversity, remote area locations and same sex relationships. Violence and abuse of the older woman is examined as well as legal responses, what older women say, stereotypes, prejudiced

behaviour, ageism and sexism leading to devaluation and invisibility and the nature of the era in which older people have lived. The resource poses a challenge for workers to respond in appropriate ways, compiling a charter of rights and producing a set of best practice principles. Workers' debriefing strategies are also provided.

The learner is targeted and encouraged to self-assess their own knowledge given all the scenarios. Handouts can be adapted and distributed after discussion and brainstorming, incorporating changes made by the group. These can be used as benchmarks for participants' own best practice principles back in the workplace.

Older women may be unaware that there are avenues to obtain help. Their life experiences might dictate that there is no way out and they may fear institutionalisation if their primary carer is removed. The worker responding to a woman's situation needs to be sensitive to the real fears of the person they are endeavouring to help and the potential for any negative impacts of disclosure.

Home is where the hurt is, a training and resource package on responding to older women experiencing family violence, is designed for the Australian situation. Available resources of this kind are few, and while it has been published for some years, it still has considerable value. The resource has a NSW focus, with the referral section made up of largely state-wide links. The contents and the training are applicable everywhere however, and trainers can provide relevant local links. Statistics and legal technical detail may need updating.

Overall, this is a practical, user-friendly resource which will assist workers in responding to the needs of older women who are dealing with violence or abuse in domestic relationships.

For orders contact Elizabeth Evatt Community Legal Centre

Website: www.eeclc.org.au

Telephone: 02 4782 4155

Email: admin@eeclc.org.au



Workshops, conferences and date claimers

1 October 2009

International Day of Older Persons Forum
Townsville, QLD

http://www.breastscreen.qld.gov.au/townsville/Clinicians/forum_older_p.pdf

1-3 October 2009

Family Violence Conference
Brisbane, QLD

<http://www.aija.org.au/Family%20Violence%2009/Prog&Reg.pdf>

8 October 2009

Eddie Gallagher Violence To Parents Seminar

9 October 2009

Facilitator training for the Who's In Charge Program
Melbourne, VIC

<http://home.datacodsl.com/~eddiegallagher/Violence%20to%20parents%20training.pdf>

8-10 October 2009

National Conference on Health and Domestic
Violence

New Orleans, USA

<http://www.fvpfhealthconference.org/>

14-16 October

Child Inclusive Family Dispute Resolution – an
Experiential Clinical Intensive
Brisbane, QLD

<http://www.casa.asn.au/docs/FT%20Child%20Inclusive%20Training%20Brochure.pdf>

21 October 2009

National Conference on Australian Prison Issues
Melbourne, VIC

<http://www.prisonissuesconference.webs.com/>

22-23 October

Ageing Safely Forum
Adelaide, SA

http://www.austdvclearinghouse.unsw.edu.au/events_reports.html#Ageing

23/30 October 2009

Project Plan to Empowerment workshops
Ricky Hunter

Brisbane, QLD

<http://www.rickyhunter.org/workshops.html>

26-28 October 2009

Supporting Children who have Experienced Domestic
and Family Violence Forum and workshop
Burswood, WA

<http://www.womenscouncil.com.au/default.aspx?MenuID=26>

28 October 2009

One day Domestic Violence Symposium
Changing Systems: Saving Lives

Brisbane, QLD

www.tavan.com.au

28-30 October 2009

Victorian Offender Treatment Association 2009
Conference

Melbourne, VIC

<http://www.vota.org.au/conference09/conference.html>

29-30 October 2009

Two day intensive training - Graham Barnes
Building Collaborative Community Responses to
Domestic Violence
Brisbane, QLD

www.tavan.com.au

11-13 November 2009

Tapestry of Trauma Conference
Brisbane, QLD

<http://www.tapestryoftrauma.com.au/>

15-18 November 2009

2009 ISPCAN Asia Pacific Regional Conference on
Child Abuse and Neglect
Perth, WA

<http://www.ispcan.org/ConferencesSupportedByISPCAN.htm>

19-20 November 2009

Allan Wade: Response-Based Practice workshop
New Town, TAS

http://www.centacaretas.org.au/documents/short_courses/Registration_form.pdf

19-21 November 2009

AbSec Conference 2009: A conference about
Aboriginal Child Protection and Foster/Kinship caring.
Penrith, NSW

<http://www.absec.org.au/home/absec-conference-2009/>

24-26 November 2009

2nd Family Relationship Services Australia National
Conference

Children and Families: Reducing risk, building
resilience

Sydney, NSW

<http://www.frsa.org.au/site/FRSA%20Conference%202009.php>

26-29 November 2009

Families in Law: Investigation, Intervention and
Protection

Freemantle, WA

http://www.anzappl.org/documents/ANZAPPLConference2009callforpapers_000.pdf

1-3 December 2009

National Aboriginal and Torres Strait Islander Family
and Community Strengths Conference
University of Newcastle, NSW

<http://www.newcastle.edu.au/centre/fac/conferences/ifcs2/index.html>

We encourage readers to contribute to the CDFVRe@der. If you have any information or articles you wish to publish, please contact Centre staff.

HAVE YOUR CONTACT DETAILS CHANGED?

We have become aware that some recipients of the CDFVRe@der have relocated or changed contact details, including email address. To enable us to update our records and ensure that you receive our quarterly publication, please contact us at the listed phone, fax or email address with your change of details. Please be assured that the Centre does not release your details to any third parties without your permission.

If you would like to be included on, or removed from, the Centre's mailing list, please ring us on (07) 4940 7834.

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The views expressed in this publication do not necessarily represent the views of the Queensland Government or CQUniversity.

Whilst all reasonable care has been taken in the preparation of this publication, no liability is assumed for any errors or omissions.



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