

Wakeup call: Prevention and response to the violence, abuse and neglect

One of the lessons we have learned through the past year of the pandemic is that large scale emergencies such as this are, of course huge a global problem, but they are also a perfect storm of risk factors for elder abuse. One way of looking at it is to break it down to three main components.

The first component is easy to understand. For older persons, social isolation is a known risk factor for experiencing elder abuse. Limited access to healthcare services they have received up to this point and to non-COVID healthcare – such as regular check-ups, diagnostics etc. – may lead to worsening health and decreasing their autonomy which may expose them to a higher risk of abuse. This also may increase the risk of disability for persons with chronic conditions which will again increase their dependency and therefore put them at risk of abuse and violence.

There is also a worry about financial issues with older persons having to spend more out of pocket funds to cover healthcare services because the system is not capable of meeting their needs during the epidemic. On top of that, they maybe have to use their pensions to financially support family members who lost their income, again due to the pandemic. And while in Serbia pensions were paid regularly to all pensioners during the lockdown, this had additional consequence in exposing them to increased risk of financial abuse. All this may lead to increased depression and anxiety, making them more vulnerable to abuse.

The other component is to do with informal and formal caregivers who are hit especially hard by the pandemic and the response measures. We know that informal caregivers are the backbone of any long-term care service system in the world, and during the pandemic they are faced with all the problems everyone else faces, such as risk of infection, movement restrictions, loss of income security etc. but on top of it they have all additional problems related to providing care to older persons. The Red Cross of Serbia research on mental health of informal caregivers during the pandemic shows: more than half of them had insufficient funds; one third lacks necessary information; more than one fifth needed respite services; more than two thirds are scared for their health or health of the older person; almost one third showed symptoms of depression. When put together, all these factors increase the risk of elder abuse.

Additionally, the older population, but also staff of residential care centres was under significant pressure due to epidemiological measures preventing visits and residents leaving the premises and required the staff to stay in their workplace for two week shifts, increasing the risk of mental health issues such as anxiety, distress and depression.

The third component is widespread ageism, one of the root causes of elder abuse, with its prejudices and stereotypes about older persons. The mirror image of this is treating older population as homogeneous and denying its diversity, which prevents us from identifying those parts of this population who are under higher risk of abuse such as functionally dependent persons, older women, socially excluded older persons. During the pandemic, older persons across the world have been treated either with overly protective, paternalistic attitudes, or have been targets of unjust rage. Both sides of that coin are bad. Taking agency from older persons in the name of protection is just concealed force and then blaming older persons for declining economy during the pandemic is not just ageist but also completely wrong.

A constant issue related to emergencies anywhere in the world is that data collection and reporting usually fail to capture unique way different groups in the population of older persons are affected. Usually we only get scattered studies on older persons and even then data is not disaggregated appropriately by age and gender, so we get bulk figures and little useful data. We then create prevention and intervention programmes without understanding and analysing specific risks and protective factors, believing that one-size-fits-all approach will be sufficient. But it is not and it creates discrimination.

In Serbia, for example, the pandemic measures included very strict prohibition of movement for persons over 65, putting all of them in detention at their homes for weeks on end. Isolation and separation from their loved ones and the fear of being unable to meet their needs related essential supplies created psychological stress. The Red Cross of Serbia research results show risk of elder abuse increasing during the lockdown, particularly for older persons with decreased functional ability and in need of additional support. The most prominent forms of abuse during this period were financial abuse and neglect followed by psychological and physical abuse. Older persons not using internet were isolated even further, which reminds us of the issue of digital divide. On the other hand, the Red Cross of Serbia had a successful remote service where older volunteers provided telephone support to their peers.

Strict lockdown imposing movement and contact restrictions on older persons must come with additional support especially to persons who have survived abuse and neglect or are at risk of abuse and neglect. It is also important to understand the epidemic response is also a learning process. This is not just to optimise the resources in a large scale emergency, but also to minimise potential adverse effects of isolation, quarantine and restrictions that may disproportionately impact older population.

But we must always remember there are two components to what is perceived a disaster: the hazard and the vulnerability of a certain population group. Both influence the effects of the emergency event on this group. Therefore, reducing vulnerability of older persons is

contributing to reducing the effects of disasters, which is achieved through improving public policy to make older persons' access to human rights better. If we focus on this, we will not only lessen the risk of elder abuse during large scale disasters, but in fact create a more inclusive, more just society.

To that end we should make sure we collect and study the data carefully, so we can provide additional services and support to those who cannot access services that supported their autonomy. We should support informal caregivers because they are the ones providing majority of services that support autonomy of older persons. That alone will not stop elder abuse but it should lessen the risk and then we should have telephone services that are easily accessible for older persons exposed to violence, with clear, simple procedures to report it. We should also make sure that all relevant information is available to as many older persons as possible, which means using multiple channels and not only relying on the internet in order to not leave them behind. Finally, we must ensure support to the civil sector that can contribute significantly to providing support and decreasing the risk of elder abuse.

The COVID-19 pandemic should act as a wakeup call to include older persons in emergency response planning, budgeting, staff allocation and response activities, using their capacity and resources and voicing their concerns and recommendations. This should be normal, we shouldn't have to even discuss it but this is still somehow an ideal rather than reality.

But we have not awakened yet. One year into the pandemic data collection is still blind to diversity of older population, measures and policies are still designed without meaningful participation of older persons, groups at higher risk still go unsupported, we still want to protect older persons without giving them a seat at the table. We talk about preserving economy while completely neglecting the large contribution older persons make to economy worldwide.

It is important to never forget that human rights do not expire as one ages and that older persons' human rights must be protected to the full extent of the applicable law just as anyone else's. A New UN Convention on Human Rights of Older Persons would be helping protect human rights of older persons at all levels and in all settings.

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