



## NORMA'S PROJECT

### A Research Study into the Sexual Assault of Older Women in Australia

## CASE STUDIES FOR WORKSHOPS

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### For a copy of the research report:

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[http://www.latrobe.edu.au/\\_data/assets/pdf\\_file/0005/585347/FinalReport4July.pdf](http://www.latrobe.edu.au/_data/assets/pdf_file/0005/585347/FinalReport4July.pdf)

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## Acute care

### Edna: sexual assault by nurse

[Mum] was ... was living independently and then she broke her hip. She was ... in hospital for [older people] for rehabilitation. Mum trusted me, you know, .... Anyhow, I said to her, "Oh, the nursing staff are wonderful here, Mum, aren't they?" ... she became distressed and then spoke again about this male nurse in the white uniform with the fat tummy and how she was frightened of him. ... It was digital rape. But, like not only that but - exposing himself. ...

Edna asked me not to report this unpleasant incident, not wanting to cause any trouble. ... I could not agree to her request ... I found ... the charge nurse, when I reported it very protective of him. Like: "That just wouldn't happen". And I know when you would hear something about the colleagues you work with and it's something you don't want to hear. She was the one that didn't want to know about it. ... I just got that impression. Like, it was one of her contemporaries wasn't it and to all intents and purposes she probably had no idea. And so it was a shock revelation and, well, it can't be true, you know. That was the impression I got. ... seems that if somebody blows the whistle on something... they've all gone to cover, you know, and that seems like the way that we protect ourselves: we all dive into a hole to make sure that our colleagues are safe and so and so is safe.

He was stood down and investigated and then I was called to an interview. ..., the accused nurse he had another nurse with him, to back up his claim and he said that he was applying vaginal cream, to which I replied: "Well, was it listed that my mother needed vaginal cream?" They were unable to answer that. ... I had three sons, - the boys said to me: Well, you've got to go to the Rape Squad", you know. So I spoke with [them and they said:] ... given Mum's age and if she had a bit of dementia, or the beginning of dementia, the case wouldn't stand up in court. ... So I drew a blank there. ... I knew her level of mental ability and I know it did happen. She wasn't that sort who talked to the fairies down the garden (Interviewee F2 & F3: family members).

### Suggested questions for discussion

- 1) How would you respond if Edna was a client in your service and her daughter approached you to report the sexual assault?
  - a. What would you say to Edna's daughter?
  - b. What would you say to Edna?
  - c. What are your organisational processes for dealing with an allegation like this?

## At home

### Anne: sexual assault by husband

We were working with a woman who was being repeatedly raped by her husband and there were three sons and she was trying to tell them without saying the sexual violence part, she was trying to tell them about what was happening to her, and that she didn't - you know, she didn't really want to stay in the home anymore because she just couldn't manage it, she was, you know, in her 80s and really quite frail. Now the sons didn't want to hear about it and I mean in the end she was saying to them, "He wants sex all the time," and they were... going, "Well what's the problem with that," you know, and then kind of joking about the father's prowess at that age ...

The reality is that the three sons and the husband were tied up in the property that they worked on, but two of the sons actually still lived at home, they were all drinkers, the males were all drinkers, and that was behaviour that had gone on for a very long time.

So clearly, her first disclosure was to the sons and they were not empathetic and discounted and downplayed her fears and concerns and she was quiet for probably another year after that, until the husband, who had dementia but was being prescribed Viagra, he ended up with a case worker and the woman built some trust with this case worker and told her what was going on, then she got an empathetic response. And the way in which they were able to handle that was to involve the doctor and look at the unintended outcomes of him continuing to have Viagra, and also by getting him regular respite so the woman could have some kind of life. ... And you know, eventually he went into care because of his dementia, the behavioural components weren't manageable at home and he actually went into care and the woman was able to carve out a bit of a safe life for herself at the home (Interviewee S9: sexual assault service).

### Suggested questions for discussion

- 1) How would you describe the response of Anne's sons to her disclose?
- 2) What impacts did their response have on her?
- 3) How did Anne's case worker respond?
- 4) How do you build trust with older female clients to communicate that they can talk to you about unwanted sexual contact or sexual assault?

### **Mary: sexual assault at home by husband**

I spoke with one woman who literally walked in to find her mother in distress because her father was assaulting her.... And she was really alarmed about it and came to appreciate that this was not a new thing, but she was not willing to name her parents or herself or take any steps for fear of her mother's safety (Interviewee S5: sexual assault service).

#### **Suggested questions for discussion**

- 1) If Mary was accessing your service, what could you do to help ensure her safety?
- 2) Why do you think Mary's daughter was not willing to take any further steps?
- 3) If Mary's daughter disclosed this to you – what would you say to her?

### **Agnes: sexual assault at home by husband**

There was an older woman and her husband accessing our services over a period of years. The woman was frail and struggling to care for her husband who had dementia. Her own health issues and carer status meant her social withdrawal and weepiness was put down to stress and ill health by workers who saw her regularly. It was only when a new worker who started with the couple they probed a little further into how they were coping to have the wife disclose that she was being sexually assaulted by her husband. The dementia had rendered her husband incapable of determining her consent or willingness and she was afraid to tell anyone as she felt she needed to protect her husband (Survey 19: aged care service).

#### **Suggested questions for discussion**

- 1) Why do you think Agnes was reluctant to talk about what was happening?
- 2) What do you think the new worker might have done to probe a little further?
- 3) What supports could be put in place to assist Agnes?

### **Maria: sexual assault at home by husband**

I remember an Italian carer who was highly stressed by the constant demands of her husband for sex. He had always wanted sex often and the desire remained but the ability did not. His repetitive pattern of demand was a constant, but not the only source of stress. He was not amenable to change because of his significant memory loss and did not know how much he was demanding. The impact on his wife was as if she was being abused even though it was unintentional ,i.e. related to forgetfulness, a repetitive refrain for sexual contact. The best way we could assist was to listen to her distress, be empathic, suggest possible strategies to try to protect herself with not much success and take him out of the home to ensure she had regular breaks. She did not want to relinquish care. His demands lessened in time. It was only when he was placed some years later that her constant digestive symptoms and pain lessened. I have no doubt that the stress she was under contributed to her health problems (Survey 27: aged care service provider).

#### **Suggested questions for discussion**

- 1) How did the service support Maria?
- 2) What was the impact of this situation on Maria's health?
- 3) Why do you think Maria wanted to continue caring for her husband?

## In residential aged care

### Patricia: sexual assault by staff member

I [was asked to provide some support to a residential institution where a resident had reported sexual assault]. ... the staff were absolutely fantastic about it, again she had some level of dementia, she did have a history of early childhood sexual assault as well, which is ..., you know, there's a bit of weighing up ... but really they just went with, well, you know, this is what she said happened and she's obviously distressed so we're going to have to take that - we're going to believe it. But he was a reliever, so I went down, she by that stage had sort of retreated into, you know, not wanting to kind of go there, so it wasn't possible to kind of have a conversation ... But anyway, he was a relieving staff so they made a decision they would never employ him again but, you know, off he went into the sector because there's absolutely no sort of [accountability]. But the police had been and everything as well so it was really handled very well (Interview s17-22: sexual assault service).

#### Suggested questions for discussion

- 1) Do you think Patricia's dementia impacted on capacity to talk about what happened to her?
- 2) What do you think the residential care service care service did that led to the comment that they had handled the situation well?
- 3) What strategies could be put in place to ensure this does not happen again?

### Celia: sexual assault by a family member

One of my clients was [in her 80s] and was being sexually assaulted in a nursing home by her husband. Fortunately the nurses were proactive, when she disclosed and moved her to another separate room, and kept her safe from him. And reduced her social contact with him, as he had physical restrictions and was wheel chair bound (Survey 32: sexual assault service).

#### Suggested questions for discussion

- 1) How were the staff able to ensure that Celia was safe?
- 2) What might the staff have said to Celia's husband?
- 3) Why do you think the staff contacted a sexual assault service?

### Amelia: sexual assault by a visitor

... we had a resident here who was in quite advanced dementia, essentially bedridden, ... There was a relative ... visiting his mother-in-law and you know, just spending time with her but then going - he was found in the room of this other resident, and he was sitting at the bedside and this lady had her breasts exposed. That shocked the staff in a big way. ...He denied that he had done anything and he was just visiting, but I think the difficulty that we have is who in their right mind would still spend time sitting at a bedside with a lady who had her breasts exposed? You know, why would a man still continue to sit there and not be mortified and embarrassed and rush out of the room. We couldn't understand that (Interviewee S6 aged care service provider).

#### Suggested questions for discussion

- 1) As a staff member, what would you say to the visitor?
- 2) What support could be put in place to ensure Amelia was safe?

- 3) What could staff do to ensure this didn't happen again?

## **Retirement village**

### **Carole: sexual assault by a co resident**

[There was] an older woman who had - was in a retirement village. She'd recently moved there, and one of the guys ... who was in his own unit kept inviting her in for cups of tea, and she didn't really like him but she felt sorry for him. You know, the old story women are supposed to look after people. So, she felt sorry that he was lonely and went in there to have a coffee with him. The next thing she remembered was waking up in his bed the next day and she'd been sexually assaulted. Now, she didn't tell anyone; she was too ashamed. ... Too ashamed to tell anyone. But less than a week later he suddenly died and she was so sort of shocked and traumatised by the whole thing that she came and sought counselling about that(Interviewee S1: sexual assault service).

### **Suggested questions for discussion**

- 1) Why do you think Carole didn't report the assault initially?
- 2) If you worked in this retirement village – how would you support Carole?
- 3) What could you do to ensure that older women in the retirement village were not vulnerable to sexual assault?