



SOUTH AUSTRALIAN JOINT COMMITTEE ON MATTERS RELATING TO ELDER ABUSE

SUBMISSION BY: AGED RIGHTS ADVOCACY SERVICE INC.

March 2017

Introduction

The Aged Right Advocacy Service Inc.¹ (ARAS) is a Statewide, not-for-profit, independent, community based organization that has provided advocacy support for older people across South Australia for more than 26 years.² Older people who use community or residential care services, people who live in retirement villages, and older people who are experiencing or who are at risk of abuse from family or friends, can use an ARAS advocate to assist them to address their concerns. ARAS is supported by an experienced committed Board³ and a full time equivalent staff of fourteen who provide information and education about aged care and broader human rights, and representation to resolve issues and ensure the voice of the older person is heard.

ARAS' vision is 'a society in which all older people are recognized as valued, active and contributing participants and where aged care services are responsive to the rights and needs of all consumers.'

ARAS' mission 'is to increase the person's control over goods, services, quality of life, and to develop a sense of empowerment and of being valued as individuals and citizens of Australia, through an advocacy process.'

Background

ARAS welcomes the opportunity to provide a submission to the South Australian Joint Committee on Matters Relating to Elder Abuse. This submission should be read in conjunction with our submissions made to the Australian Law Reform Commission (ALRC) Issues and Discussion Papers into Elder Abuse.⁴

Elder abuse is a largely hidden and complex social issue that must be addressed to ensure older South Australians can live a fulfilling life free from abuse.⁵

¹ Aged Rights Advocacy Service Inc: <http://www.sa.agedrights.asn.au/>

² Aged Rights Advocacy Service, History: http://www.sa.agedrights.asn.au/about_us/history

³ Aged Rights Advocacy Service, Board: http://www.sa.agedrights.asn.au/about_us/aras_board_members

⁴ Australian Law Reform Commission, ARAS Submission, Issues Paper: https://www.alrc.gov.au/sites/default/files/subs/166_aras.pdf; Australian Law Reform Commission, ARAS Submission, Discussion paper 83, Submission no 285 : <https://www.alrc.gov.au/inquiries/elder-abuse/submissions>.

⁵ Kaspiew, R, Carsen, R, Rhoades H, Elder Abuse in Australia, *Australian Institute of Family Studies, Family Matters 2016 no 98. P 70.*

Additionally, by addressing age discrimination, ensuring older people are able to exercise their rights, understand their responsibilities, and access entitlements, older people's ability to contribute to the South Australian community will be optimized.⁶ Age-friendly cities,⁷ positive lives campaigns,⁸ positive media images and celebrating longevity also contribute to the discourse on combating ageism.⁹

However, it is imperative when seeking to change the often negative media images of older people to more positive images, that we do not inadvertently discount the need to shine a light on elder abuse.¹⁰ Whilst the media focus is often on institutional abuse particularly in residential aged care it is important to acknowledge that elder abuse predominantly occurs within the community setting.

Additionally with South Australia being an increasingly ageing population it is crucial that appropriate support systems be implemented for older people.¹¹

ARAS commends the South Australian Government Strategy for Safeguarding the Rights of Older People and the work done to date.¹² ARAS also acknowledges the ongoing support by Minister Bettison for the annual ARAS World Elder Abuse Awareness Day (WEAAD) conference and related activities. ARAS' values the collaboration with the Office for the Ageing in developing practical resources for older South Australians. ARAS also acknowledges the many older people and networks which support ARAS message that 'there is no excuse for abuse'.

ARAS posits that elder abuse presents a range of complex legal, jurisdictional, policy, professional and structural challenges which require a cross sectorial approach between government agencies, the private financial sector, advocacy services and non- government organizations providing services to older people.¹³ It also requires a multidisciplinary approach.¹⁴

Ongoing Funding

ARAS welcomes the opportunity to be part of the solution in addressing elder abuse, however it would be remiss of ARAS not to identify concerns about ongoing funding of the ARAS Abuse Prevention Program, currently funded under Commonwealth Home Support Program (CHSP), Specialized Advocacy which will cease on 30 June 2017.

A new National Aged Care Advocacy Program will commence from 1 July 2017 combining the two currently funded programs into the new National Aged Care Advocacy Program (NACAP).¹⁵

⁶ Strategy to Safeguard the Rights of Older South Australians 2014 - 2021:

<http://sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/about+us/publications+and+resources/plans/strategy+to+safeguard+the+rights+of+older+south+australians+2014-2021>

⁷ Dr Alexandre Kalache: <https://agepositive.humanrights.gov.au/great-stories/video-dr-alexandre-kalache-age-friendly-cities>

⁸ Aged Rights Advocacy Service: Positive Lives: <https://www.youtube.com/watch?v=VtduelBGY-k>

⁹ Reframing Ageing, COTA(SA): <https://www.cotasa.org.au/default.aspx>

¹⁰ Secret Camera captures nursing home suffocation: <http://www.abc.net.au/7.30/content/2016/s4507208.htm>;

Australian Ageing Agenda, Special Report: Shedding Light on Mandatory Reporting in Aged Care:

<http://www.australianageingagenda.com.au/2016/08/24/special-report-shedding-light-on-mandatory-reporting-in-aged-care/>

¹¹ Australian Bureau of Statistics, 3101.0 Australian Demographic Statistics June 2016 :

<http://www.abs.gov.au/ausstats/abs@.nsf/Latestproducts/3101.0Media%20Release1jun%202016?opendocument&tabname=Summary&prodno=3101.0&issue=jun%202016&num=&view=>

¹² Kaspiew, R., Carsen, R., Rhoades, H. (2016). *Elder Abuse: Understanding Issues, frameworks and responses*. Melbourne: Australian Institute of Family Studies.

¹³ Kaspiew, R., Carsen, R., Rhoades, H. (2016). *Elder Abuse: Understanding Issues, frameworks and responses*. Melbourne: Australian Institute of Family Studies.

¹⁴ Kaspiew, R, Carsen, R, Rhoades H, Elder Abuse in Australia, *Australian Institute of Family Studies, Family Matters 2016* No 98, pages 64-73.

¹⁵ The Hon Ken Wyatt AM MP, Minister for Aged Care:

<http://www.health.gov.au/internet/ministers/publishing.nsf/Content/health-mediarel-yr2017-wyatt013.htm>

The ARAS funded programs which will cease from 30 June 2017 are; Residential Care Advocacy, Home Care Package and Commonwealth Home Support (community care) Advocacy, Aboriginal Advocacy Program and the Abuse Prevention Program.

Whilst ARAS will tender for the new National Aged Care Advocacy Program we are extremely concerned that the ARAS Abuse Prevention Program is at risk of termination because the draft National Aged Care Advocacy Framework specifically lists elder abuse amongst a number of 'out of scope areas' of the new NACAP program.¹⁶ ARAS recognizes that the new program's focus is on supporting older people to access their aged care rights.¹⁷

Specifically the focus of the new NACAP program will be on aged care advocacy support and information for older people and/or their nominated representatives¹⁸, to understand their aged care rights¹⁹, exercise their rights,²⁰ understand their responsibilities²¹, and receive entitlements as set out in the Aged Care Act 1997,²² User Rights Principles²³, Quality of Care Principles (Care & Services & Accreditation Standards)²⁴, Home Care Operational Manual, Commonwealth Home Support Program Manual,²⁵ contractual arrangements, and consumer law.²⁶ It is recognized that demand for advocacy support has increased 'as a result of Australia's ageing demographics' and due to 'changes to the aged care system which centre on embedding greater consumer control and choice in aged care service provision'.²⁷

The current ARAS Abuse Prevention Program (APP) supports independent community-living older people who are at risk of, or who are experiencing abuse from a family member or friend. The older person using APP services does not necessarily have any connection with aged care services.

In 2015/2016 ARAS supported 719 older people living in the community and 47 people living in residential aged care who sought our assistance for elder abuse advocacy support. We also provided 228 older people directly with information about elder abuse. We also undertook 92 education sessions with 3391 participants as well as participating in 13 promotional displays of ARAS publications. ARAS APP also attends 22 networks with 287 participants. Please note this data is applicable to the Abuse Prevention Program only.

¹⁶ This view appears to be supported by the draft National Aged Care Advocacy Framework, Updated December 2016, page 4, which appears to exclude elder abuse from the framework: <https://agedcare.health.gov.au/support-services/draft-national-aged-care-advocacy-framework>; The Australian Law Reform Commission Discussion Paper 83 also clearly identifies that elder abuse is a broader community issue but also identifies some particular issues for aged care: <https://www.alrc.gov.au/publications/elder-abuse-dp83>

¹⁷ The Hon Ken Wyatt AM MP, Minister for Aged Care: <http://www.health.gov.au/internet/ministers/publishing.nsf/Content/health-mediarel-yr2017-wyatt013.htm>. See also purpose of CHSP funding as set out in the Department of Social Services Review of Commonwealth Aged Care Advocacy Services, page 17: https://www.dss.gov.au/sites/default/files/documents/02_2016/advocacy_review_final_report.pdf

¹⁸ Draft National Aged Care Advocacy Framework December 2016, page pages 2-3:

<https://agedcare.health.gov.au/support-services/draft-national-aged-care-advocacy-framework>

¹⁹ User Rights Principles 2014; Schedules, one, two & three: <https://www.legislation.gov.au/Details/F2017C00141>

²⁰ National Aged Care Advocacy Program Guidelines, February 2017, page 4 – 5.

²¹ Aged Care Act 1997, User Rights Principles 2014; Schedule One: Charter of Care Recipients Rights and Responsibilities: Residential Care; Schedule Two: Charter of Care Recipients Rights and Responsibilities: Home Care and , Schedule Three, Charter of Care Recipients Rights and Responsibilities: Restorative Care:

<https://www.legislation.gov.au/Details/F2017C00141> as well related sections related to payments Security of tenure.

²² Aged Care Act 1997 (Cth): <https://www.legislation.gov.au/Series/C2004A05206>

²³ User Rights Principles 2014; User Rights Principles 2014; Schedule One: Charter of Care Recipients Rights and Responsibilities: Residential Care; Schedule Two: Charter of Care Recipients Rights and Responsibilities: Home Care and , Schedule Three, Charter of Care Recipients Rights and Responsibilities: Restorative Care:

<https://www.legislation.gov.au/Details/F2017C00141>

²⁴ Quality of Care Principles 2014: <https://www.legislation.gov.au/Details/F2014L00830>

²⁵ Commonwealth Home Support Program Manual 2015, National Guide to the CHSP Client Contribution Framework, Home Care Package Operational Manual.

²⁶ Draft National Aged Care Advocacy Framework December 2016, page 2.

²⁷ Department of Social Service Review of Commonwealth Aged Care Advocacy Services Final Report December 2015, pages 2, 9: https://www.dss.gov.au/sites/default/files/documents/02_2016/advocacy_review_final_report.pdf

ARAS remains concerned about a potential service delivery gap after 1 July 2017 should funding not be provided to continue supporting older people living in the community who are at risk or, or who are experiencing abuse.

ARAS has written to the Hon Minister Wyatt seeking transitional funding for the program recognizing that the ALRC Report into Elder Abuse is due in May 2017, and a National Plan will need to be developed. This is unlikely to be in place by 30 June 2017 when the ARAS program ends.

Scope of Elder Abuse in South Australia

It is estimated that 1 in 20 older people are being abused.²⁸ As of 30 June 2016 the Australian Bureau of Statistics advises that the South Australian population is approximately 1.7 million people.²⁹ As a percentage of that population 17.8% are people over the age of 65 noting that South Australia has the second highest proportion of older people.³⁰ Additionally the Australian Bureau of Statistics advises that between 2012 -2036 the number of people aged over 65 years will double.³¹

In South Australia, at both Government and Community Service levels, it is accepted that aged care and disability services are made available to Aboriginal people over the age of 50 years. According to the Australian Bureau of Statistics, Estimates and Projections 2001 to 2026, (Series A), the Aboriginal and Torres Strait Islander population in South Australia growth rate will be 2.3% with a recorded population in 2011 of 37,408.³²

Noting that financial abuse is currently the most common form of elder abuse reported to ARAS, the economic impact of such abuse should be considered as a matter of urgency. ARAS receives reports of cases where family members have spent significant proportions, if not all of an older person's savings, leaving them with little or no money. This affects their quality of life, including the ability to access housing and aged care services. It is also important to acknowledge that in most cases the alleged abuser is a family member or friend of the older person.³³ ARAS recently provided ten years of data from the ARAS Abuse Prevention Program to the South Australian Joint Committee on Matters Relating to Elder Abuse.

About Advocacy

Advocacy is well-recognized as a support mechanism to empower older people to exercise their rights.³⁴ It has been identified that 'aged care advocacy services play a vital role in helping to uphold the rights of consumers of Australian Government –subsidized aged care services and supporting

²⁸ Department for Health & Ageing. Government of South Australia. October 2015: <http://sahealth.sa.gov.au/wps/wcm/connect/1c5c95004a363b168eb2ee90d529bdaa/WEB+FILE+A6+Postcard+female++stop+elder+abuse.pdf?MOD=AJPERES&CACHEID=1c5c95004a363b168eb2ee90d529bdaa>

²⁹ Australian Bureau of Statistics, 3101.0 Australian Demographic Statistics June 2016 : <http://www.abs.gov.au/ausstats/abs@.nsf/Latestproducts/3101.0Media%20Release1jun%202016?opendocument&tabname=Summary&prodno=3101.0&issue=jun%202016&num=&view=>

³⁰ Australian Bureau of Statistics, 3101.0 Australian Demographic Statistics June 2016 : <http://www.abs.gov.au/ausstats/abs@.nsf/Latestproducts/3101.0Media%20Release1jun%202016?opendocument&tabname=Summary&prodno=3101.0&issue=jun%202016&num=&view=>

³¹ Australian Bureau of Statistics, 3101.0 Australian Demographic Statistics June 2016 : <http://www.abs.gov.au/ausstats/abs@.nsf/Latestproducts/3101.0Media%20Release1jun%202016?opendocument&tabname=Summary&prodno=3101.0&issue=jun%202016&num=&view=>

³² Australian Bureau of Statistics: <http://www.abs.gov.au/ausstats/abs@.nsf/mf/3238.0.55.001>

³³ Aged Rights Advocacy Service, Annual Report 2015/16: <http://www.sa.agedrights.asn.au/publications>

³⁴ C Ronalds, *Residents Rights in Nursing Homes and Hostels: Final Report* Canberra, Australian public Service, 1989, pp 5-6.

them to receive care that meets their needs'.³⁵ The ARAS Abuse Prevention Program has also been recognized as providing information and advocacy services aimed at preventing elder abuse.³⁶

A common definition of advocacy is:

The process of standing alongside an individual who is disadvantaged and speaking out on their behalf in a way that represents the best interests of that person'.

(Adapted from the Institute for Family Advocacy and leadership development in Australia)

ARAS's Advocacy model is based on human rights principles. The focus is on supporting the independence of the older person by providing information to support informed decision-making and self-advocacy, and representation based on the wills and preferences of the older person. This work is conducted by phone and/or face-to-face depending on the circumstances, and the needs of the older person. Community education, and aged care staff education is conducted with the aim of raising awareness about the rights of older people.

Overview of ARAS Programs

ARAS advocates for older people or their nominated representative through the following programs:

- Residential Aged Care Advocacy³⁷
- Community Care Advocacy³⁸
- Aboriginal Advocacy Program³⁹
- Abuse Prevention Program⁴⁰
- SA Elder Abuse Prevention Phone Line Support and Referral Service⁴¹
- Retirement Villages Advocacy⁴²
- WEAAD Community Activities and Conference.⁴³

For the purpose of contractual obligations ARAS distinguishes between its aged care and retirement village advocacy support programs, and the two elder abuse programs, namely the Abuse Prevention Program (APP)⁴⁴ and the South Australian Elder Abuse Prevention Phone Line Support and Referral Service⁴⁵.

ARAS aged care and retirement village advocacy programs assist older people to resolve aged care or retirement village concerns. These issues are initially presented to the service provider, but support can also be provided to raise issues with the relevant complaints commission or administering authority.⁴⁶ These programs additionally provide education and training to both consumers and

³⁵ Department of Social Service Review of Commonwealth Aged Care Advocacy Services Final Report December 2015, pages 2, 9: https://www.dss.gov.au/sites/default/files/documents/02_2016/advocacy_review_final_report.pdf

³⁶ Kaspiew, R., Carsen, R., Rhoades, H. (2016). *Elder Abuse: Understanding Issues, frameworks and responses*. Melbourne: Australian Institute of Family Studies, Chapter 36, p 38.

³⁷ Funded by the Department of Health (Cth) NACAP – Program ceases 30 June 2017. See overview of Program: http://www.sa.agedrights.asn.au/residential_care/national_aged_care_advocacy_program_service_charter

³⁸ Funded by the Department of Health (Cth) CHSP Specialised Advocacy, Program ceases 30 June 2017.

³⁹ Funded by the Department of Health (Cth) CHSP Specialised Advocacy, Program ceases 30 June 2017.

⁴⁰ Funded by the Department of Health (Cth) CHSP Specialised Advocacy, Program ceases 30 June 2017.

⁴¹ Funded by Office for the Ageing, SA Health, Program is funded to 30 June 2017.

⁴² Funded by Office for the Ageing, SA Health, Program is funded to 30 June 2017.

⁴³ Aged Rights Advocacy Service Inc: http://www.sa.agedrights.asn.au/files/507_ribbonflyerproof_2.pdf

⁴⁴ Aged Rights Advocacy Service Abuse Prevention Program: http://www.sa.agedrights.asn.au/abuse_prevention

⁴⁵ SA Health, Stop Elder Abuse, South Australia Elder Abuse Prevention Phone Line: <http://sahealth.sa.gov.au/wps/wcm/connect/public/content/sa+health+internet/health+topics/health+conditions+prevention+and+treatment/stop+elder+abuse>

⁴⁶For example the Aged Care Complaints Commissioner or the SACAT.

service providers about older people rights, responsibilities and entitlements providing a proactive preventative strategy.⁴⁷

Eligibility for receiving advocacy support for aged care recipients and retirement village residents relies on a relationship between the older person and a service provider.⁴⁸

The Elder Abuse programs on the other hand do not require a relationship with a service provider. Any older South Australian can seek information and advocacy support to safeguard against elder abuse or to access appropriate services if they are experiencing elder abuse.⁴⁹

Additionally ARAS has 16 years of experience, partnership and collaboration with Council of Aboriginal Elders South Australia (CAESA), Aboriginal elders and their communities and has gained the trust and respect of elders across the state. This long-standing relationship with community is vital to the sensitive work that ARAS undertakes in the area of elder abuse.

ARAS is therefore in the unique position of being invited by the elders to undertake community-development projects and mentoring camps for Aboriginal elders which aim to raise awareness of, and responses to, abuse of Aboriginal elders in a culturally-appropriate way.

Definitions of Elder Abuse

Definition of 'Elder'

ARAS defines older people as 65 years+ and 50 years+ for Aboriginal people.

Definition of Elder Abuse

ARAS uses the Australian Network for the Prevention of Elder Abuse (ANPEA)⁵⁰ 1999 definition of elder abuse which is:

"Abuse of an older person is any act occurring in a relationship where there is an implication of trust, which results in harm to the older person. Abuse may be physical, sexual, financial, psychological, social and/or neglect".

ARAS also acknowledges the Government of South Australia, SA Health⁵¹ and the World Health Organization definitions of elder abuse.⁵²

Mistreatment of Older Adults

ARAS welcomes the community discussion prompted by the Australian Law Reform Commission (ALRC) and the South Australian Government Joint Committee into Matters Relating to Elder Abuse. ARAS also acknowledges Beaulieu and Diaz⁵³ useful definition of the 'mistreatment' of older adults. They provide a broader contemporary view of the intersections of a number of different areas covering rights, age discrimination and elder abuse as we generally define it now. This definition identifies the different types of mistreatment of older people as:

⁴⁷ NACAP Funding Agreements require agreed outputs of education session to staff of aged care providers as well as residential consumer talks. Retirement Village Advocate also provides education sessions to consumers and Retirement Village Operators.

⁴⁸ NACAP Funding Agreement & Retirement Villages Funding Agreement.

⁴⁹ Aged Rights Advocacy Service, Abuse Prevention Program: http://www.sagedrights.asn.au/abuse_prevention

⁵⁰ Australian Network for the Prevention of Elder Abuse: <http://www.eapu.com.au/anpea>

⁵¹ SA Health:

<http://sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/health+topics/health+conditions+prevention+and+treatment/stop+elder+abuse/what+is+elder+abuse/what+is+elder+abuse>

⁵² World Health Organization: http://www.who.int/ageing/projects/elder_abuse/en/

⁵³ Beaulieu, M; Diaz, L. (2016) *Elder Abuse: The Role of Doctors* medicSA, p35-36.

- Psychological;
- Physical;
- Sexual;
- Material or financial;
- Institutional (care and services)
- Violation of Rights;
- Ageism.

ARAS would welcome an agreed national definition of elder abuse which would contribute data, including outputs and outcomes providing an evidence base to inform the future service delivery model and the National Plan.⁵⁴

ARAS Elder Abuse Specific Programs/Events

1. South Australian Elder Abuse Prevention Phone Line Support and Referral Service

19 October 2015 saw the establishment of the SA Elder Abuse Prevention Phone Line Support and Referral Service (The Phone Line). ARAS hosts the state-based information and referral service that connects callers with appropriate services that can support them or the older person experiencing abuse.

The Legal Services Commission, Office of the Public Advocate, Public Trustee, Relationships Australia and SA Police are some of the referral agencies for which the Phone Line Operator provides contact details.⁵⁵ The ARAS Abuse Prevention Program is also a referral point for people who wish to be supported by an advocate during their contact with direct support agencies.

It is also important to recognize that older people who are at risk of, or who are experiencing abuse often require some support to access the service or organisation that can provide direct assistance. In these instances, with permission from the caller, the Phone Line operator can make contact with the agency on their behalf and arrange a call-back.

The Phone Line is funded by Office for the Ageing, SA Health (OFTA), and has received 365 calls for assistance to date (22 March 2017). The current service agreement with OFTA ends on 30 June 2017.

ARAS established the SA Elder Abuse Prevention Phone Line Interagency Pathways Advisory Committee in late 2016 to ensure that pathways to referral organizations are clear, and feedback/issues between organizations and gaps in service delivery can be identified. Operational issues are discussed, and the committee is currently developing processes to improve the assistance provided to callers when moving between support services. The committee is also exploring information sharing guidelines.⁵⁶

2. Abuse Prevention Program

The ARAS Abuse Prevention Program has been operating since 1997 supporting older people who are at risk of or who are being abused with information and advocacy support. ARAS also conducts information sessions to community groups about elder abuse and prevention strategies. Our clear

⁵⁴ The Australian Liberal Party: <https://www.liberal.org.au/coalitions-policy-protect-rights-older-australians>

⁵⁶ Information Sharing Guidelines: <https://www.childprotection.sa.gov.au/child-protection-initiatives/information-sharing-guidelines>

message is that 'there is no excuse for abuse' and we have strategically focused on spreading this message to the community through our extensive networks.

The importance of understanding the nuances, perspectives and language associated with elder abuse is extremely important when providing support to CALD communities. The ARAS report about Accessing Aged Rights Advocacy Service to Prevent Elder Abuse: A Conversation with Members of two Culturally and Linguistically Diverse Communities, November 2013 provides important insight and further research suggestions.⁵⁷

One of the key themes that arose from this research was to expand on future developments in assisting in the prevention and intervention of elder abuse and the accessibility of services. The research also acknowledged the importance of how individuals from CALD communities conceptualize elder abuse. It was apparent that there was a lack of consistency and understanding of elder abuse occurring outside of the family structure. Further exploration could assist in developing ways to effectively and appropriately educate older persons from CALD communities on elder abuse. This could lead to further benefits in the prevention and intervention processes, including but not limited to, higher report rates.

In regards to strategies and recommendations participants continually stated that they would like more contact and that the home environment is the most appropriate and accessible for them. With this in mind, it is evident that contact needs to be personalized where possible with face to face being more effective in achieving the goals of the advocate and client and ARAS to provide the best outcomes.

As outlined previously, in 2015/2016 ARAS supported 719 older people living in the community and 47 people living in residential aged care who sought our assistance for elder abuse advocacy support. We also provided 228 older people directly with information about elder abuse. We also undertook 92 education sessions with 3391 participants as well as participating in 13 promotional displays of ARAS publications. ARAS APP also attends 22 networks with 287 participants. Please note this data is applicable to the Abuse Prevention Program only.

It is worth noting that ARAS currently provides regular reports to both state and Commonwealth departments in a variety of different templates for each of the ARAS programs. ARAS suggests that streamlining reporting systems between various government departments both Commonwealth & State into a national repository of data or clearinghouse would alleviate unnecessary duplication and provide a clearer picture of what is occurring.

3. World Elder Abuse Awareness Day Conference and Activities

ARAS has raised awareness about elder abuse through World Elder Abuse Awareness Day (WEAAD) Community Activities across South Australia since 2012, encouraging other organizations to raise awareness of elder abuse within their own communities through creative activities.⁵⁸ Last year over 550 kits were distributed statewide with support from the Statewide Collaborative Project Officers. 58 organizations took part and organized 126 activities with around 16,000 people participating and attending those community activities.

⁵⁷ Accessing Aged Rights Advocacy Service to Prevent Elder Abuse: A Conversation with Members of two Culturally and Linguistically Diverse Communities, November 2013: http://www.sa.agedrights.asn.au/files/232_accessing_aras_report.pdf

⁵⁸ See: http://www.sa.agedrights.asn.au/files/511_3_weaad_community_activity_booklet.pdf

Additionally, ARAS has hosted a WEAAD conference for the last 11 years with national and international speakers discussing the latest evidence/research about elder abuse.⁵⁹

Small Projects – DVD's & Toolkits

ARAS has a longstanding history of developing practical resources to support education about rights and elder abuse prevention strategies. Most recently ARAS, with funding from Office for the Ageing, SA Health has developed an educational toolkit to assist aged care agencies commence conversations that promoting four key messages: 'stay connected', 'stay active', 'stay healthy', 'stay in control'. Last year ARAS was contacted by ACT government requesting the use of ARAS developed DVDs for a TV awareness campaign associated with World Elder Abuse Awareness Day.

Specific Issues

1. Scope of abuse in Residential Aged Care

ARAS is concerned about a lack of transparency about the outcomes of the compulsory reporting system in residential aged care.⁶⁰ Residential Aged Care Providers are required to report to the Department of Health and the police, allegations or suspicions of unreasonable use of force or unlawful sexual contact by staff.⁶¹ In 2015/2016 2862 notifications of a reportable assault were made to the Department of Health.⁶² Of these reports '2422 were recorded as alleged or suspected unreasonable use of force, 396 as alleged or suspected unlawful sexual contact, and 44 as both'.⁶³ However there is no information provided on the outcome of such reports.⁶⁴ The report notes that the incidence of reports of suspected or alleged assaults represents 1.2% of residents.

ARAS recommends that consideration be given to broadening the requirements for reporting to all areas of elder abuse including financial, social, psychological abuse and neglect, as well as removing the discretion not to report if the perpetrator has a cognitive impairment. By doing so we could obtain an accurate picture of the scope of abuse and ensure that timely support is provided to residents.

Residents are entitled to feel safe where they are living, and should not be subjected to being assaulted by fellow residents. Residents who perpetrate such acts need to receive appropriate support to manage behavior or be subject to the law as is any other person who was to assault another human being. ARAS is of the view that without transparent reporting which includes outcomes we are unable to put in the appropriate measures to support the older person or inform legislative and policy reform.

Currently, there is no National central record or report on the level of peer to peer violence within facilities and the contexts in which they occur.

⁵⁹ ARAS: WEAAD Day Conference, Elder Abuse Challenges for Changemakers:
http://www.sa.agedrights.asn.au/files/507_ribbonflyerproof_2.pdf

⁶⁰ Belardi, L. 2016, *Special Report: Shedding Light on Compulsory Reporting in Aged Care*, Australian Ageing Agenda:
<http://www.australianageingagenda.com.au/2016/08/24/special-report-shedding-light-on-mandatory-reporting-in-aged-care/>

⁶² Report into the Operation of the Aged Care Act 1997, 2015/2016, p78. See:
<https://agedcare.health.gov.au/publications-and-articles/reports/report-on-the-operation-of-the-aged-care-act-1997#latest-report>

⁶³ Report into the Operation of the Aged Care Act 1997, 2015/2016, p78. See:
<https://agedcare.health.gov.au/publications-and-articles/reports/report-on-the-operation-of-the-aged-care-act-1997#latest-report>

⁶⁴ Report into the Operation of the Aged Care Act 1997, 2015/2016, p78. See:
<https://agedcare.health.gov.au/publications-and-articles/reports/report-on-the-operation-of-the-aged-care-act-1997#latest-report>

Abuse by staff providing in home services (community care) is not currently required to be reported.

Whilst ARAS is supportive of the current reporting regime being extended we also believe that there should be a mandated response to such reporting.

2. Support for Vulnerable Witnesses

ARAS supports an approach that empowers the older person, but also acknowledges the vulnerability of some older people who require additional support noting that 52% of older people residing in aged care have a diagnosis of dementia.⁶⁵ ARAS is also concerned to ensure that older people who experience or witness abuse have access to independent advocacy support when being interviewed by police.

ARAS commends the South Australian government on the implementation of the Vulnerable Witnesses Act 2015. ARAS would welcome clarification of the scope of the application of the Vulnerable Witnesses legislation and whether older people with a cognitive impairment are provided support when in contact with the justice system?⁶⁶

3. Police Role

As part of the compulsory reporting⁶⁷ system in residential aged care the police are required to be notified of alleged assaults or unreasonable use of force however there is currently no reporting process that identifies the outcomes of the current system. ARAS has been advised of situations where older people state they have not been interviewed by the police about an allegation they have made.

ARAS values working with SAPOL and understands the impact of resourcing however modern technology data collection about the compulsory reporting system and outcomes would be invaluable.

ARAS suggests that consideration be given to requiring the South Australian Police Commissioner to provide an annual statement or report to SA Parliament on the number of reports received about compulsory reporting in residential aged care, the result of the outcome of such a report, the number of older people interviewed and annual data of people over 65 years (or over 50 years for Aboriginal People) who have been a victim of crime.

4. Cameras in Aged Care

Consideration should be given to strengthening a resident's contractual rights as part of their residential aged care agreement, including specific provisions to enable a resident or their nominated representative to install or request a camera to be utilized for their protection. Please see ARAS draft Position Statement on Cameras in Residential Aged Care.⁶⁸

5. National Framework & National Data/Clearinghouse

ARAS believes that a national multi-jurisdictional, multidisciplinary body should be funded that would, represent service providers, older people and advocates to:

⁶⁵ Australian Institute of Health & Welfare: <http://www.aihw.gov.au/aged-care/residential-and-community-2011-12/dementia/>

⁶⁶ Vulnerable Witnesses Act 2015: <http://www.agd.sa.gov.au/initiatives/disability-justice-plan/statutes-amendment-vulnerable-witnesses-act-2015>

⁶⁷ Department of Health : <https://agedcare.health.gov.au/ensuring-quality/aged-care-quality-and-compliance/compulsory-reporting-for-approved-providers>

⁶⁸ Aged Rights Advocacy service Inc: http://www.sa.agedrights.asn.au/files/493_draft_position_statement_cameras_in_aged_care_september_2016.pdf

- Participate in the development and implementation of the National Plan to better protect the rights of older people to live free from exploitation and abuse;
- Coordinate independent research and evidence based policy development;
- Promote and coordinate best practice in elder abuse prevention; intervention and remediation measures; and
- Include not for profit non-governmental organizations.

6. Prevention Strategies

a. Education

ARAS believes that community education such as public awareness raising campaigns, is essential to raise awareness and to shine the light on elder abuse.⁶⁹

Mandatory Education about elder abuse should include health professionals, frontline bank tellers, transaction scrutineers, centrelink staff, police officers and aged care workers. It is essential to be able to deliver education in a number of different modes ensuring that the diversity of the audience is captured. Community education should also be extended to include collaboration with organisations such as Hairdressers and the Country Woman Associations.⁷⁰

b. Adult Support Service/ Multidisciplinary Team

Consideration should be given to implementing an Adult Support Service legislative framework. Child protection and domestic violence services currently exist, but there is no specific service dealing with elder abuse. ARAS' role could potentially expand to be part of an Adult Protective Service given ARAS's expertise and knowledge in this area. ARAS is well placed if adequately resourced, to move into such a role.

ARAS would welcome the opportunity to explore an adult support service with the current Alliance for Prevention of Elder Abuse (APEA). ARAS believes the alliance would be able to leverage their collective skills and knowledge and also provide support that combines a government and non-government partnership. Some older people, particularly from a CALD/Aboriginal background/ Care leavers advise that they appreciate non- government support services and will not seek to use or trust a government service.

ARAS's connection to both the aged care sector and the community in general allows us to leverage our skill, knowledge and expertise to provide a flexible, sophisticated response, combining a range of overarching principles, elements and practical applications for the older person to consider when seeking ARAS support.⁷¹

Conclusion

Elder Abuse presents a range of complex legal, jurisdictional, policy, professional and structural challenges which require a cross sectorial approach between government agencies, private banking sector, advocacy services and organizations providing services to older people.⁷² It also requires a

⁶⁹ Barkla, C *How Do We Protect the Rights of Older People?* INDAILY : <http://indaily.com.au/contributors/carolanne-barkla/>

⁷⁰ See: <http://www.australianageingagenda.com.au/2015/10/13/from-gps-to-hairdressers-community-workers-need-elder-abuse-training/>

⁷¹ Walkom, K, *Advocacy Support in Elder Abuse An ARAS Model*, January 2016.

⁷² Kaspiew, R, Carsen, R, Rhoades H, *Elder Abuse in Australia, Australian Institute of Family Studies, Family Matters 2016 no 98. Pp 64-73.*

multidisciplinary approach.⁷³ ARAS has made a number of recommendations that we feel would support older people who are experiencing abuse and provide a system of safeguards for the prevention of elder abuse.

Recommendations:

Recommendation: The South Australian Government reform the Powers of Attorney Act to ensure safeguards are put in place to protect older people from financial abuse;

Recommendation: The South Australian Government put in place the ability for an older person to seek compensation via SACAT for the loss of their assets/money through the misuse of Enduring Power of Attorney;

Recommendation: The South Australian Government work in collaboration with the Australian Government to ensure that banking reforms and changed processes are implemented to better protect older people's assets and money;

Recommendation: Mandatory elder abuse awareness training be implemented including but not limited to all frontline bank tellers, relevant financial transactions scrutineers, Centrelink staff, police officers, health professionals and aged care/community care workers;

Recommendation: The Australian Government extend compulsory reporting to all areas of abuse and remove the current exception to reporting.

Recommendation: The South Australian Police Commissioner provide an annual statement or report to SA Parliament on the number of reports received about compulsory reporting in residential aged care, the result of the outcome of such a report, the number of older people interviewed and annual data of people over 65 years (or over 50 years for Aboriginal People) who have been a victim of crime.

Recommendations: The South Australian Government or Australian Government consider funding a trial of Advocacy Support being offered to older person who have reported being a victim of elder abuse in residential aged care.

Recommendation: The Australian and South Australian Governments work together to ensure that comprehensive data is collected to provide transparency and accountability about elder abuse and institutional abuse.

Recommendation: The South Australian Government require all criminal and civil proceeding and court records including heading pages of cases to identify if the victim/complainant is over 65 years of age or an Aboriginal Person over 50 years.

⁷³ Kaspiew, R, Carsen, R, Rhoades H, Elder Abuse in Australia, *Australian Institute of Family Studies, Family Matters 2016 No 98*, pages 64-73.

Recommendation: That the Australian National Plan for Elder Abuse be developed with the input of non- government organisations such as ARAS.

Recommendation: In the absence of ongoing funding for the ARAS Abuse Prevention Program by the Australian Government as part of the National Aged Care Advocacy Program after 30 June 2017, that the Australian Government provide transitional funding whilst the ALRC reports on the findings and the National Plan is developed. Alternatively the South Australian Government provide funding whilst the SA Parliamentary Committee Elder Abuse Inquiry is completed.

Recommendation: The SA Elder Abuse Prevention Phone Line be funded for 3 years with the Advisory Committee continuing to work on interagency pathways, communication, and identifying service gaps and improvement.

Recommendation: The South Australian Government provide ARAS with funding to promote the SA Elder Abuse Prevention Phone Line, leveraging off current aged care programs and access to older people networks.

Recommendation: The South Australian Government consider funding a trial for a Multi- Agency/Multidisciplinary Team to support older people who are at risk of, or who are experiencing abuse. This team should be comprised of the current APEA members – SAPOL, LSC, OPA, Public Trustee & ARAS.

