

Aging & Disabilities

Domestic violence in later life and violence against people with disabilities is largely overlooked by the systems and service providers that should be helping them (e.g., aging, domestic violence, sexual assault, criminal justice and health and human services). This occurs for many reasons. For example, intervening agencies find it hard to believe that a frail elderly perpetrator can inflict harm. Some helping professions maintain a caregiver stress orientation, working to alleviate perpetrator stressors but doing nothing to address victim safety needs. And professionals who work from a family systems theory basis find it tremendously difficult to accept and incorporate a power and control explanation for abuse in the families with whom they work. Adult children are looked to by intervenors to remedy the situation, often further exacerbating it. Diverse perspectives among the domestic violence, aging and therapeutic communities have contributed to the lack of a cohesive and comprehensive network of services for older victims of domestic abuse and their abusers.

People with physical and/or cognitive limitations are uniquely vulnerable to domestic violence. Individuals who are dependent upon others for daily living, handling finances, or transportation are at greatest risk as this gives others a tremendous amount of control over the lives of these individuals. Some systems delineate certain physical acts (e.g., restraints, confinement, etc.) as warranted in order to control an individual. End Domestic Abuse Wisconsin (WCADV)'s Aging and Disabilities Program works to help community systems and services to identify elder and vulnerable adult victims of domestic violence, to appropriately discern domestic violence from other possible causes of an elder or a person with a disability's victimization, and appropriately offer support, intervention, and referral to treat victims and perpetrators.

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