

abuse of older women

"The public at large is generally unaware of the incidences of sexual assaults against the elderly.

It is an unsavory thing to think of, yet it occurs and possibly with more frequency than we previously imagined. ... What we don't know, we turn our backs on."

"Taboo and inconceivable"

There has been slow but increasing awareness of elderly abuse over the past 20 years. As challenging as it is for the population at large to acknowledge, it is even harder for older people to admit that they have been victimised. As a result, statistical evidence on the extent of elderly abuse is scarce.

A 2002 World Health Organization (WHO) study on the abuse of older adults in Germany, France, Sweden, Thailand, Kenya and Columbia reinforced "how difficult elder abuse is for some older adults to discuss." Even when research participants do acknowledge sexual abuse, they tend to deny its extent or impact. Older people are often reluctant to reveal incidents of sexual violence because discussion of any sexual activity is often deemed inappropriate, "rendering the disclosure of abusive situations even more taboo and inconceivable." 3

The global proportion of people aged 60 years and older is projected to double between 2000 and 2050 from 10 percent to 21 percent. Because women make up the majority of older adults in almost all countries around the world — and because the proportion of women to men increases with age — it is important to understand the forms of violence against older women and the cultural traditions that place them in peril. 5

Older women are more vulnerable to abuse than older men and are burdened with a lifetime of experiences and beliefs that may increase their susceptibility. What holds true in youth remains so in age: In most instances, "Those who are victims are female; those who abuse are male." Violence and abuse against older women can be sexual, physical or psychological and also can include material or financial abuse and neglect. It can occur in the home, in institutions or as a result of harmful cultural practices that specifically target older women.

Abuse in the home

Researchers have identified domestic violence as the most common form of abuse against elderly females, and many women who suffer at the hands of their partners when they are young continue to be abused in their old age. In a South Korean study, 21.5 percent of elderly married couples admitted to experiencing intimate-partner violence. The

research showed that many older men with a history of domestic violence abused their wives throughout their relationships. In some cases, the abuse did not begin until later in the marriage, when a husband's frustrations

with domestic changes that accompany older age, such as retirement, caused him to act out physically against his wife. In a 2003 study in the United States, 38 older women between 55 years and 90 years of age discussed their experiences with domestic violence. Many of the women admitted that they had stayed in violent relationships because societal expectations at the time of their marriage required them to "submit to the physical and sexual wishes of their husbands." 10

Older women without intimate partners may be particularly vulnerable to abuse by other family members. Sons, for example, have been implicated as perpetrators of sexual violence against their mothers. In research in the Cape Flats township in South Africa, "Older people identified sexual abuse as the most common form of violence, including adult sons forcing their mothers to have sex with them." One older woman explained the indignity of such abuse:

"When you are a mother ... left behind with children who are boys, there is one amongst your children ... he wants to sleep with you and wants that you must not talk about it. ... You are afraid because you do not have the strength. He does that thing as he pleases." 12

In a British study, more than half of the older women who had been sexually assaulted were abused by their adult sons, and most of the abuse was vaginal rape. ¹³ One theory suggests that adult sons who sexually assault their elderly mothers are assuming the roles of their abusive fathers. Another reason for this kind of abuse is the misconception in some communities that sex with older people can cure HIV/AIDS, a counterpart to the myth of the "virgin cure". ¹⁴

Although studies have shown that sexual abuse at home usually is perpetrated by a relative, it also can be inflicted by unrelated domestic caregivers or by random assailants. While many people think that rape is

a "sexually motivated crime" that affects only younger women, it is also, in fact, perpetrated against older women, whose perceived or actual vulnerability makes them likely victims. ¹⁵ In one case in the United States, a 19-year-old male broke into the apartment of a 76-year-old woman, "ripped off her clothing, raped her vaginally, then anally, and finally assaulted her vaginally with an umbrella lying nearby. He used a

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piece of glass from the broken window to cut her throat."¹⁶ In another case, a 20-year-old offender assaulted and murdered a 77-year-old woman. He "repeatedly stabbed her in the face, chest, and vagina with a butcher knife."¹⁷

In Eastern Europe and Russia, older women are becoming more frequent targets for criminal attacks. ¹⁸ In the Caribbean, where many older women have been sexually abused, one woman expressed her concern about being raped by youth gangs: "I am afraid to go out alone, even on the beach or for a little walk." ¹⁹ Latin America has been identified as a region with particular social conditions that exacerbate violence against the elderly, including civil war, crime and drug-related violence. ²⁰ In Zimbabwe, 30 percent of the respondents to a study on violence against the elderly said that the threat of being attacked was severe enough to prevent them from participating in their own communities. ²¹

Abuse in institutional settings

While institutions such as adult-care facilities and hospitals can provide elderly people with support and security, residents are still at risk of sexual abuse by staff, other residents and visitors. One study of sexual crimes against the elderly in the state of Virginia in the United States revealed that 71 percent of assaults against older people took place in nursing homes.²² Many incidents are difficult to investigate, however, because the age and health of the victim and/or perpetrator may compromise his or her ability to recollect important details of the assault.²³

There are no national or crossnational studies that focus specifically on sexual abuse in institutions, but the cases that are reported illustrate the types of crimes that are being perpetrated. For example, an 84-year-old male resident of a nursing home in the United States committed

Bessie Shippey, now deceased, was removed from Valeries' Residential Care Home for the Elderly in the United States at age 98, after living there for one year. Her granddaughter and doctor grew concerned after discovering severe bruises covering her body. Although the home's caregiver explained that Bessie's bruises were from falling, the doctor believed otherwise: "When I saw this lady, I knew that it could not have been from falling. ... [The bruises] were in all stages – they were not all recent. And there was the imprint of a hand on her face."

Despite her initial reluctance, Bessie eventually admitted to her granddaughter that the caregiver had started beating her soon after she arrived at the home. She did not speak out immediately because she did not want to burden her granddaughter, who was unwell. Deaf and almost blind, Bessie was particularly vulnerable. After leaving the home, she had nightmares and cowered, trembled and begged for forgiveness whenever she had an accident.

Image: National Center on Elder Abuse, Washington D.C.



numerous abuses: "One aide saw him rubbing an elderly woman through her adult diaper, another caught him on top of a resident, her pyjamas pushed up around her neck. He was found in one woman's room as she

cowered behind a chair, naked."24 In another case, also in the United States, police found an elderly woman who had run away from her nursing home wandering near a major highway. She did not want to return: "I want to die.

The *sati* tradition in India, where women immolate themselves on their husbands' funeral pyres, dates back thousands of years.³⁰ Early accounts describe tens of thousands of widow queens practising group *sati* after

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Please hit me with your car,' she begged. Several weeks later a nursing assistant walked into the woman's room and found a frequent male visitor with his hands between the woman's legs."²⁵

While the number of older adults living in care facilities is low — between 4 percent and 7 percent in developed countries, between 1 percent and 4 percent in Latin America and even lower in other developing regions — lack of regulation or enforcement of rules at hospitals and nursing homes can create environments that are unsafe for older females. ²⁶ In developing countries, elderly patients are frequently mistreated in institutions, many of which lack the necessary structural capacity and personnel. In Kenya, for example, the head of one hospital admitted, "Older people are a big headache and a waste of scarce resources. The biggest favour you could do to me as an older people's organization is to get them out of my hospital."

Deadly traditions

All over the world, women live longer than their partners. Some forms of violence against older women are based on cultural practices that specifically target widows, who are often regarded as insignificant without their husbands. While widows of all ages are subjected to mistreatment, older widows can be particularly vulnerable when their age lowers their status in the community and makes caring for themselves more difficult.

In many countries, including Azerbaijan, Burundi, China, Ethiopia, India, Lithuania, Malaysia, Russia, South Africa and Sudan, over half of the women over age 60 are widowed. In 15 out of 16 countries listed in a 2002 report on the state of the world's older people, between 5 percent and 25 percent of men over age 60 are widowers, whereas 35 percent to 65 percent of women over age 60 in the same countries are widowed, a huge discrepancy. The same is reflected throughout Asia: More than 50 percent of older women and only 13 percent of older men are widowed. Percent of older women and only 13 percent of older men are widowed.

the death of their king, while others recount individual acts of *sati*. Even though the custom was abolished officially in 1829, rare but reported incidents continue, and many shrines still exist to honour thousands of these widows.³¹

There are different explanations for the motivation behind the custom, ranging from a widow's desire to join her husband in the afterlife — since traditional Indian culture dictates that a woman without a man is incomplete — to her relatives' desire to preserve family inheritance, as property is divided amongst male heirs after a widow has died. Recent reports suggest that not all widows who follow the tradition do so willingly: In 2002, a 65-year-old widow from Madhya Pradesh died from immolation on her husband's funeral pyre. Authorities suspected that the woman, who had separated from her husband, did not commit sati of her own free will because she "did not have good relations with her husband" and "the grown-up sons did not make any attempt to discourage their mother from sitting on their father's pyre." 33

Today, in parts of India where popular *sati* shrines exist, communities may encourage widows to follow the practice, as they stand to earn money from donations by visitors to the shrines.³⁴ Many people in India, however, are speaking out against the tradition. According to one activist, regardless of whether the motivation for a widow to commit *sati* is forced or voluntary, "no virtuosity of semantics can justify or condone such an act of nihilism. ... It is totally unacceptable to distinguish between forced *sati* as being criminal and voluntary *sati* as being cultural tradition. There never was and never can be a cultural tradition that sanctifies the death of a human being."³⁵

The tradition of wife inheritance in parts of Africa is rationalised by some as being essential to keeping widows integrated in their communities. In many countries, including Rwanda, Uganda, Kenya and Zimbabwe, a widow becomes the property of another man from her village, usually a brother or close male relative of her late husband. It has been argued that the custom benefits widows by offering them security,

but because the practice is obligatory, it should be considered a form of gender-based discrimination that results in sexual abuse.

A deadly implication of wife inheritance is the degree to which the custom can transmit HIV. A widow who is HIV-negative faces the risk of contracting the virus from the man who inherits her. In other cases, a widow who has contracted HIV from her late husband — who may have died from an AIDS-related illness — will transmit the disease to her inheritor when she is forced to have sex with him. In the context of polygynous practices, this can set off a chain of events in which the man transmits the virus to his other wives, who may in turn infect others if they are widowed and inherited, and so on.

Notably, in western Kenya, the tradition of wife inheritance is practised by a number of communities — which not coincidentally also have the highest rate of HIV infection in the country. In 2000, the HIV-prevalence rate in Nyanza province, for example, was 22 percent,

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compared to the national HIV-infection rate, which was 13 percent.³⁶ Despite the risks, the tradition of wife inheritance continues because most widows have no alternative. If they refuse, they risk rejection by their communities.³⁷

Widow cleansing is another custom that denies women their basic rights and increases their risk of HIV infection. According to the practice, a woman is required to have sex with a village cleanser after her husband dies in order to be reaccepted into her community. The tradition exists in Zambia, Kenya, Malawi, Uganda, Tanzania, Ghana, Senegal, Angola, Ivory Coast, Congo and Nigeria, among other countries. Widow cleansing "dates back centuries and is rooted in a belief that a woman is haunted by spirits after her husband dies. She is also thought to be unholy and 'disturbed' if she is unmarried and abstains from sex." Another traditional belief holds that a widow who has not been cleansed can cause the whole community to be haunted. In many instances a widow must undergo the ritual before she can be inherited.

A widow cleanser in Malawi explained that the "tradition dictates that he sleep with the widow, then with each of his own wives, and then again with the widow, all in one night."⁴¹ He admitted that he never uses

condoms and acknowledged that he may be infecting hundreds of women, or even himself. A Kenyan widow cleanser expressed equal disregard for condom use. He said that the widows "wouldn't really be cleansed if the condom was there" 42

Even women who are aware of the risk of HIV infection may submit to cleansing rituals because of community pressure. One woman from Malawi described her feelings of resignation and shame: "I was hiding my private parts. ... You want to have a liking for a man to have sex, not to have someone force you. But I had no choice, knowing the whole village was against me."⁴³

Another Malawian woman, Paulina Bubala, who is now the leader of a community group for people living with HIV/AIDS, first participated in an alternative rite but was ultimately forced to undergo a widow-cleansing ritual. For the first step of the cleansing rite, Paulina and her co-wife "covered themselves in mud for three days. Then they each

bathed, stripped naked with their dead husband's nephew and rubbed their bodies against his. Weeks later, the village headman told them this cleansing ritual would not suffice. Even the stools they sat on would be considered unclean, he

warned, unless they had sex with the nephew. 'We felt humiliated,' she said, 'but there was nothing we could do to resist, because we wanted to be clean in the land of the headman.' "44

Witchcraft accusations also result in violence against older women in some African countries. In Tanzania, an estimated 500 older women are murdered each year because of witchcraft claims. ⁴⁵ In Mozambique, more than 90 older women were victims of violence in one month, the majority a result of witchcraft allegations. ⁴⁶ When communities cannot find logical explanations for events, "such as a death or crop failure," they may accuse older women in their village of witchcraft. ⁴⁷

Such accusations might be used to justify driving an older woman from her home, stealing her possessions or killing her for her property. Ntombama Mlalazi, a 62-year-old widow, was accused of being a witch in her village in Zimbabwe and ordered to submit to an exorcism by her local chief. "People were dying, and *tsikamutanda* [witch hunters] said I was responsible. They made me crouch over a bucket with boiling water and covered me with a blanket. When I cried out that the steam was hurting me I could hear the *tsikamutanda* saying the demon was leaving me." 49

Addressing elderly abuse

Underreporting and underinvestigation are major challenges to addressing the issue of violence against elderly women in the home, in institutions and in communities. In one community in Chile, of the nearly 30 percent of women experiencing abuse by family members, 61 percent of the victims did not seek support. They cited "fear, shame and lack of economic resources and information" as reasons for maintaining their silence. ⁵⁰ In a study of 90 indigenous Australian women who were victims of intimate-partner violence, participants identified a number of barriers to reporting, including lack of access to services because of the women's remote location, language difficulty, guilt and fear of exposing family problems.

Cases of sexual violence against elderly women that are reported may not be properly investigated because embarrassment prevents some victims from providing crucial details, as was the case in Pennsylvania in the United States, where a 62-year-old woman was forced to perform oral sex on a stranger. She was so ashamed that she did not disclose to anyone the true nature of the assault. When the vaginal examination showed no signs of rape, the case was dropped. Months later, during a counselling session, the woman broke down and admitted that she was forced to perform fellatio.⁵¹

The strategies employed to help battered women — empowerment, education and support in assessing their options — transcend the age issue. ⁵² Still, many older victims of violence complain that most support services cater specifically to younger women. Older women seeking refuge from domestic abuse said that they

would prefer taking shelter with their peers. When grouped together with younger victims, "They were expected to take on the 'grandma' role and felt unable

to decline, even though they needed to deal with their own issues."⁵³ Older women who contract HIV from sexual violence — which is not unlikely during forced sex because their bodies are more susceptible to tearing, thus facilitating transmission — also may have difficulty finding appropriate support. Although HIV/AIDS affects older women, most programmes that deal with prevention and treatment of HIV are targeted at younger women.⁵⁴ Experts suggest that information about resources for older women should be available in places where they congregate.⁵⁵

Concerns that are age-specific need to be incorporated into professional training programmes to establish appropriate ways to handle cases of

elderly sexual abuse. Medical personnel are among the best people to identify cases of violence against members of any age group and are especially useful for recognising signs of abuse in older women, who are more likely to be seeing doctors for other health-related reasons, at least in developed countries.

Detecting evidence of abuse, however, is only the first step in a series of measures necessary to support older women who have been victims of sexual violence. "Even the most compassionate and experienced of service providers in aging, including those most directly involved in abuse issues, typically lack specific training in this area." One researcher of elderly sexual abuse emphasised the lack of shared, professional knowledge:

"The problem is that when you need a specialised rape-crisis counsellor to deal with your 82-year-old victim, they're just not there. They don't exist. That's why we need to do some cross-training. Let's get the rape-crisis centre people, the battered women's centre people, and the elderabuse people all together. If we give the rape-crisis treatment people some training in elder abuse, they'll be there when we need them. And the people who know elder abuse need to be talking to the people who know domestic violence. We need all three pieces." ⁵⁷

Peer support to older victims should be a major component of prevention and response.⁵⁸ In some communities, people already have started to address the problem. One peer-support initiative in Poland encourages older women who live alone to "buddy up" when walking

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outside.⁵⁹ In Peru, women's groups offer members a support network in which they can share their concerns. An older woman in Lima explained that she felt less isolated after she established a peer-support network:

"Once I got older and started not feeling so well I had to withdraw from my activities. It really hit me hard and I got very depressed. I saw myself getting worse because I wasn't participating anymore, so I decided to form my own group of older women like me — a group for older people."

In Kenya, local women's groups teach their peers how to reject harmful cultural practices like widow cleansing and wife inheritance. Such

grassroots initiatives have been successful in convincing male community members that these customs can endanger an entire society, as evidenced by the reflections of one man: "We used to say we would die for our traditions. I used to say cleansing was good. But I think this attitude helps nothing. We all may die if we don't stop this one."61

Community responses should be complemented by public-awareness initiatives and governmental prevention strategies. In India, women's rights activists have lobbied the government to prohibit the worship of widows who have committed sati. Their work resulted in a government ban on celebrations of sati in 1988. A slew of pro-sati lobbies to the supreme court followed in an effort to undermine their progress.⁶² One anti-sati activist remarked that lobbying the government is not enough to eradicate the practice: "It is clear that what is required is a multipronged strategy consisting of legal measures, effective state intervention, rehabilitation and public education." On the African continent,

community activists have lobbied government officials to legislate against wife inheritance and widow cleansing, as these customs increase the risk of HIV transmission. In both Zambia and Malawi, national authorities "have spoken out against forcing widows into sex or marriage," illustrating significant progress by local female activists.⁶⁴

Addressing the abuse of older women requires coordinating the efforts of researchers, healthcare providers, government authorities and community organizations. When a victim is courageous enough to come forward, she should be secure in the knowledge that she will have access to adequate support services by trained professionals and that her complaint will be properly investigated. For many women, being victimised in old age is yet another battle in a lifelong struggle against discrimination and abuse. The greatest challenge to stopping violence against older women lies in reforming the societies that tolerate or perpetuate the abuse of all women, regardless of their age.

"It was at midnight when the attackers came. I was asleep, and my husband was visiting his sister in the village, so I was alone. There were five military men. They came in and removed all my clothes. They stabbed me in the head and on the top of my arms with a machete, as they forced my hands back behind my head. I was screaming all the time as they raped me, all five of them, one by one. As one was raping me another would say, 'Get out so I can enter.' They took me by force, causing my leg to be hit against something. They hit my hand with a stick and it is now damaged. My husband heard my screaming and came to find me. He was beaten with a gun — they beat him in the knees. I was aching so much, I felt great pains. When they left I crawled out of the house. They were burning a house in the village and then burned mine.

"They left me with fistula but I was cured by DOCS [Doctors on Call Services, in the Democratic Republic of Congo]. I couldn't stay long with fistula — the smell was so bad from the urine. I went to DOCS and returned in August 2004.

"I am very, very happy today to receive the goat, beans and hoe [from DOCS]. I have nothing. Look at the house [a mud house with tiny dusty room for cooking and a piece of cloth separating the bedroom from the kitchen, so dark]. When the goat gives birth, I will give the first baby to DOCS. Because of the famine it will not be possible to sell the beans at the first harvest, but in the future I plan to sell them. I want to give part of my first harvest to DOCS, the rest I will use to feed my family. I am strong to cultivate."

Varanasi, India, is also called Kashi, or "City of Light". As the home of thousands of widows who have been ostracised by their families after rejecting the *sati* tradition – in which a widow immolates herself on her husband's funeral pyre — Varanasi has come to be known as the "City of Ten Thousand Widows". Its inhabitants, or *kashi-vas*, bide their time there, practising a variety of purification rituals in the hope that they will achieve *moksha*, or redemption. Before sunrise, the *kashi-vas* gather at the riverbank for their daily ritual bath. The rest of the day is punctuated by visits to temples, a single meal and prayer and sacrifice, or *puja*. While the exact number of widows living in *Kashi* is unknown, there are numerous old women in the city, alone or in small groups, begging for their existence. Most of the *kashi-vas* live on the streets in makeshift shelters of wood or plastic sheeting. A lucky few live in small rented rooms, supported financially by the family members who have sent them away. Rejected by both their family and society, the *kashi-vas* are highly vulnerable to random acts of physical and sexual violence. Some of the widows endure this meagre existence for more than 25 years, hoping that by the end of their lives they will have paid the price of outliving their husbands.

Images: Zana Briski (facing) and Mirjam Letsch (below)