Me too? The invisible older victims of sexual violence  
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Introduction
For years, the elder abuse and domestic violence scholarship have failed to devote attention to sexual violence as a distinct form of violence that elders in general and older women in particular experience by intimate partners, caregivers, or strangers. Sexual abuse of older women remained unnamed, unrecognized, under-reported, and, as such, at the margins of legal research, social activism and policy work.

This research attempts to fill the gap in the legal scholarship. To achieve this end, I examined and analyzed 109 publicly available American cases involving sexual violence against women over the age of 60 in the United States, between the years 2000-2018, which are based on a search of 1,308 American cases.

A key theme that emerged from the analysis is the gap between the scholarship on sexual violence against elders and older women and the judicial reflection of this issue in American case law. A complementary research, which is conducted these days in Israel, in which I examine all cases of sexual violence against elders in the Israeli criminal justice system, reveals similar findings. A Canadian study that was conducted few years ago presents similar findings.

Prevalence:
Sexual abuse of older people is the least reported and substantiated form of elder abuse. According to a comprehensive study from 2017, documented by the World Health Organization (WHO), the prevalence of sexual abuse reported by older victims in community settings was 0.9 percent. In institutional settings, 1.9 percent was reported by victims or their proxies, and 0.7 percent was reported by staff. In an American study on the prevalence of various forms of elder abuse, it was estimated that 0.6 percent of people aged 60 years or older were exposed to some form of sexual violence. Studies in Asia (China, Japan, and Singapore) and in Europe have described similarly low numbers, with prevalence rates of sexual assault of older people ranging between zero percent and two percent. These numbers do not represent the full scope of this phenomenon due to various reasons, as will be discussed in the following sections.

Characteristics of Sexual Abuse of Older Women
1. Gender of the Victims and Perpetrators
   Sexual abuse of elders is a gendered phenomenon. Older women are at greater risk than are older men for physical abuse, sexual abuse, and neglect. Most victims of sexual violence in late life are women. Research indicates that most perpetrators of sexual abuse of older people are men.

2. Forms of Sexual Violence against Older People
   The literature describes six types of sexual abuse of elders: sexual abuse by strangers, acquaintance violence, abuse by non-family care providers, abuse by children (incestuous abuse), marital or partner abuse, and resident-to-resident abuse in care facilities. Data show that the most prevalent type of sexual abuse is that committed by family members, usually spouses or children.
3. **Disability**

Many older victims of sexual abuse are women with cognitive limitations or physical care needs. Dementia, which plagues many older people, is common among victims of abuse.

4. **Location of the Sexual Violence**

Data regarding the location of the abuse varies across studies. Most studies in the fields of gendered violence indicate that the majority of elders were abused in their own or in a family member’s home. Most studies in the elder abuse field point to nursing homes and care facilities as central locations of abuse.

5. **Outcomes of Sexual Abuse of Older People**

The outcomes of sexual abuse of older women are devastating. Physical injuries and emotional trauma are amplified because of the age of the victims. Often, both the physical and emotional effects of sexual violence result in lifestyle changes, such as loss of independence and moving to a nursing home or other care facilities.

The above description sheds light on some important aspects of sexual abuse of older women. First, gender plays a central role in understanding sexual abuse in late life. Second, many older victims of sexual abuse are women with cognitive limitations, in particular dementia, or physical care needs, which are conditions that increase their vulnerability to sexual abuse. Third, most perpetrators are the victim’s spouse or close family members creating further dependence on the perpetrators and likely contributing to the low reporting rates. Fourth, sexual violence usually occurs either in the victim’s home or in an institutional setting where the victim lives. This increases their vulnerability and makes it difficult to seek help. Fifth, sexual abuse of older women is a significant cause of injury (even death), illness, loss of productivity, and isolation. It violates the equal rights of men and women, women’s right to safety and security, and the right to physical and mental health.

These characteristics reflect the vulnerability of older victims of sexual violence and explain the low reporting of this phenomenon. Covid-19 has serious implications on this vulnerability. It increases the loneliness of elders, forces them to stay at homes or in nursing facilities, distances them from society and further puts them at the margins of the community. Elders become more dependent in times of crisis, whether it is emotional, physical, or economic dependency. On top of the "regular" difficulties in reporting the assault, the social isolation, along emotional and economic dependency and health issues increase elders' dependency and vulnerability and limit the possibilities of legal, health and social treatment.

**Findings Of The Current Research**

Analysis of the findings shows that there is a significant gap between the scholarly work on sexual violence of older women and the legal reality reflected in case law. Although rape by an intimate partner or family member is a prevalent form of sexual abuse according to literature, it is absent in the legal analysis of American cases. Most rapes perpetrated by strangers in the cases. Rape in institutional settings is a prevalent form of sexual abuse of elders and a main topic in the research on elder abuse. The legal picture, however, reveals few cases of sexual abuse in nursing homes, care facilities, or hospitals. The Canadian study and my current Israeli research present a similar picture.

73 of the 109 American cases (68 percent) of the cases involved strangers as the perpetrators of the sexual violence. In the majority of these cases the rape took place in the context of home invasion, burglary, robbery, or battery. 13 cases (12
percent) can be characterized as acquaintance rape, where the victim knew the perpetrator to some extent. Only 19 cases (17.4 percent) involved sexual violence that occurred in an institutional settings.

Although the literature indicates that most sexual offences against older women are committed by intimate partners, the present research, similar to the Canadian and Israeli studies, provides different data. Of 1,308 American cases covering a period of 18 years, I could not find a single case of rape in an intimate relationship. In a period of 20 years, the Canadian researchers found only one case involving sexual assault by a spouse. A similar picture emerges with regards to rape by family members. The current research reveals only two cases perpetrated by family members.

The outcomes of sexual abuse for older women are overwhelming and life changing. Many of the women had to leave their lifelong homes, enter institutional care, or other care facilities. Some suffered permanent injuries, major depression, and significant deterioration of their overall health. Twenty eight women of 147 victims, died as a result of the assault.

Analysis and Future Thoughts

Despite findings indicating that sexual abuse of older women (and older people in general) is a significant issue creating serious consequences for victims, legal actors, social workers, health professionals, family members, and society miss its signs.

Ageist assumptions about older women being at low risk for rape because of their perceived (a)sexuality, combined with outdated and patriarchal assumptions regarding rape and rape victims, produce a subliminal rejection of sexual abuse of older women. These assumptions are the result of limited academic, social, and legal attention to this phenomenon.

Like younger women, older women tend not to report non-stranger acts of rape. Naming these acts as rape, proving non-consent in these situations and, overall, overcoming archaic beliefs regarding women and sexual violence pose major challenges for women (of all ages). Older age brings about additional difficulties and creates further hurdles for women who experience sexual abuse. Ageist assumptions about older women's sexuality; extra vulnerability to sexual abuse because of illness and disabilities; negative perceptions of people with disabilities; disbelief and lack of awareness of sexual violence in late age by family members, professionals, and legal actors; and long-term abusive relationships are some of the sources of vulnerability in late age and of the denial of sexual violence against older women. Older women thus experience multiple challenges based on their status as women and as older people.

The research shows that sexual abuse of older women is being noticed and treated by the criminal justice system (and other professionals) almost only when it reflects the "real rape" scenario.

Considering the above, scholars, professionals, and policy makers should consider the interplay between age and gender in framing the phenomenon of sexual abuse of older women and in conceptualizing it. Although it is a form of elder abuse, it should be distinguished from elder abuse and should be understood as part of a wider context of gender-based violence.

One of the negative implications of Covid-19 is the escalation of gender-based violence, particularly at home. Another negative consequences is the marginalization of elders and their "separation" from society. The combination of the two elements makes it difficult to recognize and treat the problem.

There is a need for a holistic approach that provides older women with infrastructures and legal and social mechanisms that fit their needs and experiences both as women and older people. One such possibility is developing training
programs for prosecutors, police, and social workers which promote familiarity with the topic, awareness of the unique needs and characteristics of the problem, and techniques to interview older victims. Another suggestion is strengthening cooperation between aged care services and law enforcement. Other possibilities include community projects with elders that will raise awareness of the phenomenon of sexual violence in late age and will promote access to legal and social services (such as rape crisis centers).

Older women who experience sexual violence face unique challenges and hurdles in naming the abuse, recognizing it, and reporting it to authorities. Law enforcement and other professionals do not acknowledge this phenomenon as a distinct phenomenon and often perceive it as a form of elder abuse or as a sexual assault issue. Societal and legal response that accounts for the interplay between age and gender and the way it shapes older women's experience of sexual violence will assist in conceptualizing sexual abuse of older women as a separate category and will make this issue visible to the public and legal eyes.