STAND UP SPEAK OUT
27-29 JULY 2026

2026 AUSTRALIAN ELDER ABUSE CONFERENCE

Examining safeguarding in residential aged care to prevent sexual violence and abuse

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The Residential Aged Care (RAC) context

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- Approx. 50 people in Australian RAC facilities each week
- 60% of incidents involved a person with dementia as the victim and/or perpetrator (Fang & Yan, 2018)
- Victims more commonly females with cognitive or physical impairments (Malmedal et al., 2015; Smith et al., 2018)
- Perpetrators more commonly males (Malmedal et al., 2015; Smith et al., 2018)
- Perpetrated by:
  - Staff & volunteers
  - Other residents (Smith et al., 2018)

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Staff have a responsibility to protect older people from harm, but…

- over 80% of staff observed abuse, only 2% of abuse reported to management (Cooper et al., 2008)
- witness present in 13-66% of SVA cases, primarily staff witnesses (Smith et al., 2018)

> Staff perceived:
>
> *Abuse from co-residents – 'A normal part of nursing-home life'*
>
> *Abuse from relatives – 'A private affair', and*
>
> *Abuse from direct-care staff – 'An unthinkable event'*
>
> (Myhre et al., 2020, p.6)

Why? Maybe...

- Staffing, training, knowledge and understanding, fear of consequences, hesitancy to believe or substantiate claims
  (Goergen, 2004; Mileski et al., 2019; Moore, 2016; Myhre et al., 2020; Payne & Fletcher, 2005; Smith et al., 2018)
- Need to know more!

Guardianship

- Guardian: *any person that may notice and intervene in potential crime*
- Effective to prevent, disrupt, and reduce severity of SVA

‘Guardianship in Action’ model

Reynald (2009, 2010)

Perspectives of aged care staff

- Interviews with aged care staff (n = 9)
  - Various levels / roles
  - Reflexive thematic analysis (Braun & Clarke, 2021)

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1. What do staff think are challenges for detecting, identifying, and responding to SVA?
2. What do staff think we can do to enhance safeguarding against SVA of older people in RAC?

Challenges for capable guardianship

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Individual capacity

- Limited awareness, knowledge, understanding
  - CALD workforce
- Perceptions of responsibility
- Fear of consequences

Unique context of RAC

- Privacy vs safety
- Resident impairments
  - Barriers to communication/disclosure
  - Certainty of concerns
  - Resident perspectives of harmful behaviour
- Normalisation of concerning resident behaviours

> "*The staff are not really aware that... there are many possibilities of [sexual abuse] happening. So... when we see something, that won't jump into your mind; you'll always think of every other thing apart from sexual abuse, because it may not make sense to you.*" P4

> "*some staff might fear that if they were to report on things, it would affect their employment [...] all the way from 'I lose some important shifts'... to, you know, 'I could lose my job or fail a promotion'.*" P1

> "*our homes are built to be able to accommodate people, they're not built in order to prevent blind spots.*" P9

> "*when that person has cognitive impairment, that question of whether it happened or not; is that delusion? Is that hallucinations? Or ... it didn't really happen, but it was misinterpreted.*" P5

> "*it happens so frequently [...] I think that desensitises people a little bit to sexual actions. And I think that could maybe lessen the impact.*" P7

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Challenges for capable guardianship

Role demands

- Limited opportunities for monitoring
- Staff familiarity with residents
- Capacity for responding

RAC operations and culture

- Reporting and response processes
- Organisational culture and hierarchy
- Attitudes
  - SVA as a sensitive topic
  - Negative attitudes towards reporting

"*the supervision won't be there 24/7, right?*" P3

"*if you don't really know and you already have 10,000 things to do … there's an urge that just like … "someone's gonna pick it up anyway, I'm just gonna let it slip'.*" P5

"*they're the most useless forms ever* [...] *they're just so convoluted and take so long* [...] *who has hours?"* P7

"*unless it's … witnessed, it's an allegation, and you've got a huge rigmarole to go through to; you've got to stand staff down, ... you've got to do your reporting … potentially, you've got police involvement, you've got a lot of investigation, … sometimes with the Commission as well.*" P3

"*if you got have a management team that is not really supporting... staff just lose confidence or just lose the trust, or just generally don't be bothered because 'oh, the management are not gonna do something. I'm just speaking out for nothing'.*" P6

"*there's just, like, the general hesitation and ageism across the sector to talk about sexuality and sexual violence in a real way, because we don't want to think about it.*" P8

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How can we enhance safeguarding?

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> *"you can have the best systems in the world, but unless you've got the right people and the right amount of them that are supported, they're going to be challenged to be actually able to use the the system as it's intended."* P5

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How can we enhance safeguarding?

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Building a competent, confident, consistent workforce

- Sufficient, consistent, qualified workforce
- Training to build confidence and capacity of staff
  - » Awareness and understanding about SVA and indicators
  - » Appropriate boundaries and navigating intimate activities
  - » What is reportable and how to report
  - » Engaging, ongoing, practical skills-based, sensitive

Aiding supervision

- CCTV
- Staffing
- Policies + practices

Enhancing reporting and response systems

- Reporting processes
  - » Easy and safe to report with minimal stress
  - » Defined roles and responsibilities
- Avenues for advice and support (internal + external)

Embedding safeguarding culture

- Openness + willingness to discuss SVA
- Shifting attitudes to reporting
- Valuing and empowering staff
- Strengthening relationships between staff across role-levels

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Implications and future directions

1) need to consider individual- and contextual-level factors that influence staff detection, identification, and responses

2) need more focus on supporting staff in navigating complex, real-world situations

3) need to shift safeguarding approach from reactive to preventative

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