# Screening Tool for Potential Situations of **Sexual Mistreatment** Against Older Adults

Sexual mistreatment of older adults can be difficult to identify and is often underestimated due to challenges related to disclosure, the sensitive nature of the issue, and the discomfort it may cause for both victims and service providers. Ageist beliefs that older adults are asexual and sexually undesirable also contribute to making this form of mistreatment less visible. Nevertheless, frontline workers and professionals who work with older adults in various living environments and care settings play a key role in screening these situations. By being attentive and properly equipped, they can recognize sexual mistreatment and provide appropriate support to victims.

This tool is designed to raise awareness and support professionals and practitioners in the health and social services network, as well as in the community sector, in screening potential situations of sexual mistreatment involving older adults.

## When should it be used?

This tool should be used when there are concerns or uncertainties regarding a potential situation of sexual mistreatment involving an older adult.

## How should it be used?

This tool is intended to be integrated into an interdisciplinary approach and to promote collaboration among members of the clinical or psychosocial team. Its use does not replace specialized training or the clinical support required in situations involving sexual mistreatment. Rather, it serves as a resource to support reflection, observation, and the identification of potential cases.

The tool may be used:

- Flexibly and adaptively:
  - As a reflective guide or checklist;
  - To structure observations;
  - To document concerns regarding a potential situation of sexual mistreatment.

For awareness-raising purposes with older adults:

- To support discussions that raise awareness of sexual mistreatment among older adults during workshops or community discussion sessions.

For awareness-raising purposes among professionals and practitioners from various sectors, in order to:

- Promote a better understanding of what constitutes sexual mistreatment;
- Establish a common language;
- Enhance the recognition of potential situations of sexual mistreatment.

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# Resources

## Screening Tool for Potential Situations of **Sexual Mistreatment** Against Older Adults

The tool is part of the follow-up to the Plan d'action gouvernemental pour contrer la maltraitance envers les personnes aînées 2022-2027 (MSSS, 2022), the Law L-6.3 Act to combat maltreatment of seniors and other persons of full age in vulnerable situations, and the Stratégie gouvernementale intégrée pour contrer la violence sexuelle, la violence conjugale et rebâtir la confiance 2022-2027(Secrétariat à la condition féminine, 2024). It does not replace the need for training or the clinical support required in situations involving mistreatment.

### The tool includes three sections to help identify a potential situation of sexual mistreatment:

**1. Definitions**

**2. Checklist**

A) General characteristics of older adult victims

B) General characteristics of perpetrators

**3. Analysis grid for a sexual mistreatment situation**

A) Screening signs of sexual mistreatment

B) Identifying manifestations of sexual mistreatment

## Resources

- **Professional consultation**
  - The Mistreatment Helpline: 1-888-489-2287
- **In Health and Social Services Institutions**
  - Policies to Counter Older Adults Mistreatment
  - PIC representatives
- **Services for victims of sexual mistreatment**
  - Sexual Violence Helpline: 1-888-933-9007
  - RQ-CALACS (in many regions)
  - Info-Santé et Info-Sociale: 811
  - IVAC: 1-800-561-4822
- **Services for male victims**
  - ROQHAS
- **Services perpetrators of sexual mistreatment**
  - CIVAS Eastern Townships: 1-819-564-5127 # 222 (only in French)
  - CIVAS Montérégie (only in French)
  - CETAS (The Laurentians and srrounding areas: 1-450-431-6400

**Referral Services for professionals**

- RIMAS: 1-514-250-0029 (only in French)

# Section 1: Definitions

## Sexual Mistreatment

Sexual mistreatment is defined as "[…] attitudes, words, gestures, or failure to take appropriate actions with a sexual connotation that are non-consensual and harm well-being or sexual integrity." There are two forms of sexual mistreatment: sexual violence, which refers to "[s]uggestive remarks or behaviors, sexually charged jokes, promiscuity, exhibitionist behavior, sexual assaults (unwanted touching, forced sexual intercourse), etc.," and sexual neglect, which is observed through "[d]eprivation of intimacy, treating the older person as an asexual being and/or preventing them from expressing their sexuality, etc." (Chaire de recherche sur la maltraitance envers les personnes aînées et al., 2022, p.1).

## Sexual Consent

Sexual consent refers to a clear, enthusiastic, and ongoing expression, whether through words or gestures, of the desire to engage in sexual activities. It must be freely given, informed, and it can be withdrawn at any time. Certain conditions, for example and without limitation, major neurocognitive disorders or intoxications may affect a person's ability to consent and therefore compromise the validity of consent. Consent can only be given by the person directly involved or participating in the sexual activity.

According to the Comité national d'éthique sur le vieillissement (CNEV), in cases of major neurocognitive disorder, the level of decision-making autonomy required for sexual consent evolves throughout the course of the illness. In the early stage of the disease, the person remains capable of giving consent. As the illness progresses, decision-making autonomy can be affected, and the capacity to consent becomes unclear. When a person becomes inapt, they can no longer give consent. Therefore, service providers must balance respecting the right to privacy, including sexuality and autonomy while also protecting vulnerable individuals (MSSS, 2021).

## Vulnerability Factors

''Vulnerability factors refer to characteristics specific to the older adult that may make them more likely to experience mistreatment.'' (MSSS, 2022, p. 12).

## Risk Factors

"Risk factors are more closely related to the person's environment and the characteristics of their relationships within their close or extended network." (MSSS, 2022, p. 12).

## Protective Factors

"Protective factors are elements that help reduce the likelihood of a mistreatment situation developing or continuing." (MSSS, 2022, p. 15).

## Signs

[…] "observable signs that may suggest, but do not confirm, the existence of an abuse situation." (MSSS, 2022, p.8).

## Manifestations

Manifestations are signs that are specific to sexual mistreatment..

# Section 2: Checklist

## A) General Characteristics of Older Adult Victims

**File number:** _____ **Date:** _____

**Instructions: Identify the vulnerability, risk, and protective factors observed in the older adult.**

## Vulnerability Factors

### Facteurs individuels

- ☐ Being a woman
- ☐ Identifying as a person from the LGBTQ+ community
- ☐ Being a gender-diverse person
- ☐ Being a Indigenous person
- ☐ Being from an immigrant background
- ☐ Speaking a language other than French or English
- ☐ Having limiting beliefs
- ☐ Having a history of trauma or abuse in childhood or adulthood

### Physical Factors

- ☐ Being frail (small in size and/or lacking physical strength)
- ☐ Presenting a loss of autonomy or having a disability
- ☐ Having a major neurocognitive disorder
- ☐ Experiencing mental health disorders
- ☐ Excessive use of prescribed medication
- ☐ Poor overall health

- ☐ Other: _____

## Risk Factors

### Place of Residence

- ☐ Living alone (for a woman) or in a communal living environment (all genders included)

### Social Isolation or Inadequate Social Support

- ☐ Weak social network
- ☐ Limited access to appropriate services
- ☐ Presence within the older person's circle (e.g., caregivers, children, spouses, neighbors, co-residents, or employees) of individuals exhibiting perpetrator characteristics as defined in Section B (see next page)

### State of dependency

- ☐ Depending on healthcare staff, a caregiver, or a family member for hygiene-related care or medical care due to an illness or a temporary or permanent limitation.
- ☐ Financial dependence on a caregiver or a family member.
- ☐ Other: _____

## Protective Factors

### Individual Factors

- ☐ Good self-esteem
- ☐ Ability to ask for help
- ☐ Understanding of one's emotions
- ☐ Good social participation
- ☐ Good physical and cognitive health
- ☐ Awareness of sexual mistreatment
- ☐ Awareness of consent
- ☐ Ability to identify and express personal boundaries

### Factors related to the Environment

- ☐ Availability of an adequate and supportive social network
- ☐ Safe environment adapted to the older adult's needs
- ☐ Communal living environment with appropriate supervision
- ☐ Staff who are vigilant and well equipped to intervene effectively in cases of sexual mistreatment
- ☐ Presence of policies and laws related to sexual mistreatment

- ☐ Other: _____

# Section 2: Checklist

## B) General Characteristics of Perpetrators

**File Number:** _____ **Date:** _____

There is a wide range of characteristics among perpetrators of sexual mistreatment. There is no single profile, although certain vulnerability and risk factors tend to emerge and should be considered when assessing potential situations of sexual mistreatment involving an older adult living at home and/or in a care setting. Perpetrators can be of any age, ethnicity, sex, and/or gender identity. They may also commit more than one type of mistreatment and may not exhibit any apparent vulnerability or risk factors.

## Vulnerability Factors

### Cognitive State

- ☐ Major neurocognitive disorder (e.g. Alzheimer's disease)
- ☐ Damage to specific areas of the brain (the temporolimbic system, hypothalamus, and frontal lobe) can lead to sexual disinhibition and impulsive behaviors.

### Motivation to Commit Sexual Mistreatment

- ☐ Seeking emotional or sexual fulfillment
- ☐ Desiring immediate sexual gratification
- ☐ Sexual attraction to older adults
- ☐ Desiring to humiliate or dominate the victim
- ☐ Lack of self-control

### Behaviour

- ☐ Exhibiting hypersexuality
- ☐ Limited social skills
- ☐ Low self-esteem
- ☐ Alcohol and/or drug dependence
- ☐ History of violence

### Criminal Record

- ☐ Residents or visitors with criminal backgrounds-sexual or otherwise-whose histories may be unknown to administrative or caregiving staff.

- ☐ Other: _____

## Risk Factors

### Inadequate Living Environment

- ☐ An unstimulating living environment can lead to sensory deprivation (understimulation), especially in cases of neurocognitive disorder.
- ☐ A communal living environment that includes isolated or poorly supervised area.

### Factors Related to the Relationship of Trust

- ☐ Low financial autonomy
- ☐ Dependency relationship with the victim
- ☐ Living in the same household

- ☐ Other: _____

## Protective Factors

### Sexually Disinhibited Behaviors Caused by a Major Neurocognitive Disorder

- ☐ Increased level of supervision
- ☐ Limiting contact with potential victims

### Factors Associated with Reduced Recidivism

- ☐ Therapy
- ☐ Participation in prevention programs

- ☐ Other: _____

# Section 3: Analysis Grid for a Sexual Mistreatment Situation

## A) Screening Signs of Sexual Mistreatment

**File number** _____ **Date:** _____

When screening signs of mistreatment among older adults from diverse ethnocultural communities, additional barriers may be present, such as discrimination and/or social exclusion. For some newcomers, language barriers or a lack of understanding of their rights can hinder disclosure. It is therefore essential to demonstrate cultural sensitivity by using a reflective approach when assessing potential situations of sexual mistreatment.

It is also important to note that a person who is a victim of sexual mistreatment may exhibit no signs at all. Conversely, the presence of a sign does not necessarily indicate sexual mistreatment, as it could also suggest other forms of mistreatment or unrelated issues. Taken individually, these signs do not constitute proof, but they can help in identifying a potential situation of sexual mistreatment..

**Instructions: Mark the signs observed in the older adult. Some signs may not be observable depending on the nature of your work or work setting.**

### Observed Physical Sign(s)

- ☐ Genital infections
- ☐ Genital injuries (bruises, cuts, abrasions, redness, swelling)
- ☐ Anal injuries
- ☐ Uterine prolapse
- ☐ Unexplained physical injuries
- ☐ Presence of a sexually transmitted infection (STI)
- ☐ Presence or smell of semen on a person who is unable to give sexual consent
- ☐ Psychosomatic symptoms
- ☐ Other: _____

### Observed Behavioral and Psychological Sign(s)

- ☐ Withdrawal and isolation
- ☐ Depression
- ☐ Distrust
- ☐ Significant mood changes
- ☐ Hypervigilance
- ☐ Involuntary crying spells
- ☐ Sudden outbursts of aggression or anger
- ☐ Sudden use of highly sexualized speech
- ☐ Signs of anxiety during the provision of care
- ☐ Sudden fear of having contracted a sexually transmitted infection (STI)
- ☐ Significant behavioral changes
- ☐ Significant change in appetite or eating habits
- ☐ Significant change in sleep habits (e.g., nightmares, night terrors, sleep disturbances)
- ☐ Sudden fear of healthcare staff or a specific individual
- ☐ Other: _____

# Section 3: Analysis Grid for a Sexual Mistreatment Situation

## B) Identifying Signs of Sexual Mistreatment

**File number** _____

**Date:** _____

If you suspect a case of sexual mistreatment, refer to your institution's mistreatment prevention policy or consult the reporting context analysis tool (mandatory or voluntary reporting) Reporting and Complaint Procedure.

**Instructions: Check the suspected manifestation(s) of sexual mistreatment.**

### Suspected Manifestation(s) of Sexual Violence

- ☐ Sexually explicit jokes
- ☐ Insertion of fingers or objects in genitalia
- ☐ Promiscuous behavior
- ☐ Voyeurism
- ☐ Exhibitionist behavior
- ☐ Non-consensual touching
- ☐ Forced kissing
- ☐ Sexual intercourse without consent
- ☐ Forcing the person to watch pornography
- ☐ Non-consensual oral-genital contact
- ☐ Other: _____

### Suspected Manifestation(s) of Sexual Neglect

- ☐ Deprivation of the older adult's privacy
- ☐ The older adult is treated as an asexual being
- ☐ The older adult is not allowed to express their sexuality, whether alone or with a partner.
- ☐ The individual's sexual orientation is not respected
- ☐ The individual's gender identity is not respected

- ☐ Other: _____

### If you selected one or more items, please specify as needed:

_____

_____

_____

_____

_____

# Appendix

## Additional Information

Based on the information gathered and the context, you are encouraged to:

- Make a mandatory or voluntary report, as required under applicable legal provisions;
- Continue supporting the older adult, if this falls within your scope of practice and mandate;
- Or refer the person to appropriate specialized services, such as:
  a. Sexual violence support and service centres;
  b. Psychosocial support services;
  c. Specialized helplines;
  d. Police services.

## Limitations

Users of the tool have screened several limitations that should be acknowledged:

1. The ability to use the tool in its entirety may be affected by the nature of the practitioner's role or practice setting (e.g., observing physical indicators may be more limited in certain professions, or the practitioner may not be in a position to observe characteristics of the alleged perpetrator);
2. Its use may be constrained by the limited amount of time practitioners have with older adults;
3. Without access to clinical support, using the tool may prove challenging and may increase practitioners' sense of isolation when dealing with potential or confirmed situations of sexual mistreatment;
4. Finally, when the tool is used for awareness-raising purposes, it should be introduced with sensitivity, as this topic may cause discomfort or trigger painful memories for older adults.