Domestic abuse and dementia. Characteristic features and patterns of domestic abuse in the over 65’s after the onset of dementia.

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Background – my interest

• Old age psychiatry clinics, including memory assessment service for dementia
• Conflict and difficulties within marital relationships
• Very abusive patients on the dementia wards – staff confusion and strong reactions
• Literature search did not reveal any research into the impact of dementia on longstanding domestic abuse
Aims

• To identify and describe the consequences of one or both parties developing dementia on a longstanding abusive relationship in the over 65’s

• To be able to outline the impact of dementia on the risk of physical and emotional abuse to both parties

• Initially to investigate this with a preliminary study
Methods

- Case notes review- rapid access to large amounts of information
- Patients who were suspected of experiencing domestic abuse identified by staff in the older persons community mental health teams across Somerset
- 34 patients, who formed part of 34 dyads were identified by staff
- 22 dyads were included in the study.
- Case notes were read throughout, and data was extracted to complete a content matrix for each patient and carer record.
Results

- 21 of the 22 victims were female
- 3 of the 22 perpetrators were women
- 2 were mother daughter relationships
- The remaining 20 dyads were heterosexual couples who were married or separated/divorced
- 1 female perpetrator in a married couple
Types of Domestic Abuse Pre and Post Dementia by Dyad (n=22)

- Emotional
- Emotional and physical
- Emotional, physical and sexual

Pre Dementia vs Post Dementia

Percentage of couples

Types of Abuse
The Impact of Dementia

- The onset of dementia resulted in an escalation in the severity of the domestic abuse in 100% of dyads.

- 72.7% of dyads experienced high severity domestic abuse after the onset of dementia.

- This included severe injurious physical abuse in 11 (50%) of the dyads.
• For example one carer recounted an episode with her abusive husband saying that ‘she went to bed and got up to use the toilet, whilst in the bathroom with the door locked he kicked open the door, damaging the door frame, and grabbed her around the throat, she managed to get away and left the house’.

• Another woman reported that her husband had become more aggressive and told of an incident where, ‘he dragged her outside when she was on the phone – she was on floor outside distressed’.
Characteristics of High Violence Group by Dyad (n=11)

- Perpetrator suffers from dementia: 100%
- Male perpetrator: 100%
- Previous case of physical and emotional abuse: 80%
- Safeguarding or criminal justice involved: 70%
- Couple separates: 100%
## Outcomes

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stay together</td>
<td>7</td>
<td>31.8</td>
</tr>
<tr>
<td>Separate voluntarily</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>One person moves into residential care</td>
<td>6</td>
<td>27.3</td>
</tr>
<tr>
<td>One person admitted to hospital</td>
<td>6</td>
<td>27.3</td>
</tr>
<tr>
<td>One person detained in prison</td>
<td>1</td>
<td>4.5</td>
</tr>
</tbody>
</table>
Management

- 36.3% of all dyads had safeguarding involved
- 27.2% had the criminal justice system involved
- 31.8% had treatment as usual in the mental health services
Discussion - shortcomings

- Sampling – selection by staff, means more severe abuse more likely to be identified

- Sample size – small

- Information in notes – variable in quality, assessing severity was difficult, especially in relation to historical abuse
Discussion

• A preliminary look at an important and growing group of patients in society

• A vulnerable group, who are at risk of severe injury and high levels of distress

• Also high service use group with multiple agency involvement in many cases
Thank you

Any questions?