

Elder law review

Working together: a health justice partnership to address elder abuse

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Li's story

Li has been married to her husband, Chen, for 35 years. She was a teacher and was the main "breadwinner" until a few years ago. She had a stroke and sees a physiotherapist on a regular basis. Over time it has become apparent to her physiotherapist that she is experiencing significant physical, financial and psychological abuse committed by Chen.

Due to her complex health condition, Li is unable to go anywhere without Chen – he goes to all her appointments. She wants to make a will leaving her savings to her children. But she knows her husband won't allow her to see a lawyer. The police have taken out an intervention order for Li against Chen, which allows him to remain living at the house, but prohibits family violence. His behaviour has improved, but Li believes that if Chen hears about any will he may become violent.

Li is not alone. Her story illustrates some of the barriers associated with addressing elder abuse, especially if legal issues are involved. The two most commonly cited are: (a) the overriding desire to preserve family relationships; and (b) the fear of family members being penalised or prosecuted.

Elder abuse may be subtle and, in the absence of disclosure, can be difficult to detect or anticipate. Even if a person does want to take legal action, their circumstances may make it impossible for them to access the services they need.

the role of health professionals

Health professionals are well placed to identify elder abuse. They can identify the risks and warning signs and because they have developed an ongoing

relationship of trust, an older person may be more likely to disclose abuse in this 'safe' relationship.

Lawyers rely on trusted health and community professionals to identify relevant legal issues and, if necessary, support the older person in seeking legal help.

elder abuse as a 'life problem'

An older person's experience of elder abuse might involve interconnected health, social and legal issues.

By resolving the underlying legal problem, health professionals and clients can focus on addressing health and social issues:

I couldn't work on [the client's] health issues with him because he could only focus on the conflict and potentially being homeless.

cohealth worker

working together

Given the barriers, sensitivities and complexities associated with elder abuse, it makes sense for lawyers and health professionals to work together.

This is why Justice Connect Seniors Law has established two health justice partnerships – one with cohealth, a community health service, and the other with St Vincent's Hospital – to help older people experiencing elder abuse and other legal issues.

Justice Connect has a lawyer based at cohealth four days a week and another lawyer at St Vincent's two days a week.

The HJP with cohealth commenced in 2015 and is funded by the [Victorian Legal Services Board + Commissioner](#) and independently evaluated by La Trobe University. The St Vincent's Hospital HJP commenced in January this year with funding from Seniors Rights Victoria and St Vincent's Health Australia.

Justice Connect has also secured funding from Equity Trustees and the NSW Department of Family and Community Services to establish a HJP in NSW – also focussing on elder abuse.

the partners

[Justice Connect Seniors Law](#) provides free legal help to older people experiencing elder abuse and other legal issues associated with ageing, including:

- elder abuse – property, contract, intervention orders
- powers of attorney, guardianship and administration
- housing issues
- making arrangements to live with family
- credit and debt

[cohealth](#) is a rights-based community health organisation, delivering medical, dental, mental health, allied health, and community support services to people in northern and western metropolitan Melbourne.

[St Vincent's Hospital Melbourne](#) is a tertiary public healthcare service providing a range of services, including acute medical and surgical services, emergency and critical care, aged care, diagnostics, rehabilitation, allied health, mental health, palliative care and residential care.

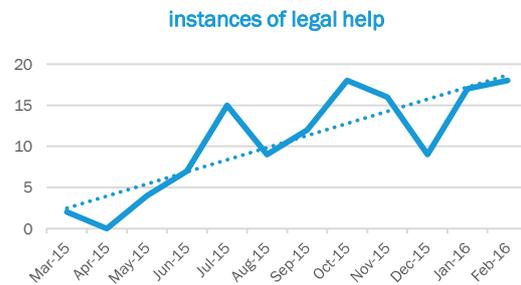
Impact – cohealth HJP first year

Snapshot

Between March 2015 and Feb 2016, the following occurred:

- 135+ instances of legal help
- 100+ professional development
- 420+ community legal education

As word spread there was a lawyer in the office, the number requests for legal help steadily increased over the year.



greater reach

The partnership is helping clients who otherwise would not have been able to or who would be reluctant to speak to lawyer.

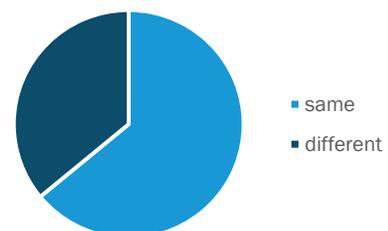
The partners have identified four reasons for why this partnership is a better way to reach older people experiencing elder abuse:

- **colocation**

Being on-site, the HJP lawyer is in a good position to develop relationships with health professionals over a period of time. The lawyer can also help raise awareness about elder abuse and provide immediate legal help

The value of having the lawyer present on-site was evident in the number of requests for secondary consultations, the majority coming from professionals based at the same site as the lawyer.

sites requesting consults



- **client-centred service**

But it's not just about a lawyer sitting in a health care centre. The partners want to demonstrate a service that is flexible, transparent and responsive to urgent need, as illustrated by Li's story.

Li's story – part two

The only time Li could speak to a lawyer was during her appointments with her physiotherapist. Because of the relationship between Li's workers, the HJP lawyer and pro bono lawyers, we could coordinate appointments so that Li could get a will done, while her husband remained in the waiting room.

This means the lawyers could help Li with her legal issues in a confidential and safe space. Li could then be confident that her savings will be left to her children in accordance with her wishes, rather than for the benefit of her abusive husband.

For other cohealth clients requiring legal help, health professionals emphasised the importance of being flexible and responsive:

If you say "you may hear from me in three days", their mobile phone may be out of credit or switched off. Things escalate if the response is slow. This way [the legal service] shows the client [their problem] can be resolved.

cohealth worker

- **secondary consultations**

The availability of secondary consultations is important because it means older people have access to legal information quickly – especially for those who are reluctant to speak to a lawyer.

Consultations also help the lawyer build trust and credibility with colleagues by providing a convenient and immediate source of legal information:

Sometimes I use [the HJP lawyer] just to sound her out. Some situations haven't advanced to a referral, but [the HJP lawyer] has had good ideas about how to work with the situation.

It's a God-send. To be able to ring someone with a really knotty problem and talk those over.

cohealth worker

- **professional development**

Ongoing professional development sessions are important to build the capacity of workers to: identify abuse; ask questions about abuse; make legal referrals; and to work with lawyers:

98% agreed, after PD, they are more likely to – or already confident in their ability to – *identify* abuse

98% agreed, in future, they will *ask about* abuse

100% agreed, in future, they *will* – or already do – refer to the HJP lawyer

98% agreed, after PD, they have a better understanding of – or already knew – how to *work with* lawyers

concluding remarks

A health justice partnership helps to overcome some of the barriers facing older people who want help when experiencing elder abuse.

Health or legal organisations interested in this model may want to consider:

- having a lawyer collocated at a health service
- integrating a lawyer as part of a client-centred service
- promoting the use of secondary consultations
- supporting workers with ongoing professional development

For more information, please refer to the [first year report](#) for the HJP between Justice Connect and cohealth.