ii. Older Person Case Study

Note, the name has been changed in the following to protect the person's identity.

Summary

X is in his 80s and has been married to his wife for many years.

X was supported to contact Assia in November 2024 by a carer's wellbeing service. He was allocated to the Older Persons IDVA in January 2025.

Background

X had a good relationship with his wife but reported a change in her behaviour towards him, belittling him and provoking arguments and making accusations. X believes he was being gaslit too and made to feel he was going crazy. Eventually things became physical with his wife throwing things at X. One day X was assaulted and required hospital treatment and whilst there he was referred to Adult Services.

Adult Services assessed X's wife as requiring some care which he was happy to carry out. The case was then closed to Adult Services.

X's wife's care needs increased as did her abuse towards X.

Challenges

X found the changes in his wife's behaviour difficult to understand and accept as it was very different in their relationship. These changes progressed slowly so were unnoticeable until X found them unbearable.

Family was unable to give helpful advice and there were difficulties in accessing support. X became more isolated as he tried to manage his wife's behaviours.

X still loved his wife and did not want her to lose friends or get into trouble if he told people about her behaviour.

Solution and implementation

X reached out to his GP as he was struggling to manage his increasing injuries and decreasing mental health. He was referred to a carer's wellbeing service. After a few visits X's support worker felt he was at risk of further abuse from his wife. He was supported to attend Assia drop-in service to speak with an IDVA for support around domestic abuse.

On assessment, X was given a safety plan with suggestions on how to de-escalate abusive situations. He learned when and how to find a place of safety.

Further investigation from the IDVA found that the behaviour change could be the onset of dementia. A referral was made to support services and a GP. X's wife was assessed as having the onset of dementia.

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Results

The introduction of services made it easier for X and the family. The IDVA was able to apply for benefits and funding for new appliances that helped to make life easier.

Regular professionals' meetings were set up to discuss and address any issues arising as soon as possible and to share information where appropriate. Further safety plans were discussed and agreed with X to continue to assess his own safety and keep himself and his wife safe.

X is aware that he can contact his IDVA and other support workers at any time should he need to in the future.

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