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Social work research from a gender perspective into intimate partner violence against older women in Spain

Estudio de trabajo social desde una perspectiva de género sobre violencia de género en parejas contra mujeres mayores en España

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ABSTRACT

Intimate partner violence against older women is a hidden problem in Spain, which needs the involvement of institutions, professionals and families. This research aimed to shed light on social workers' practices, and how they propose to perform ethical, efficient social work with older women who have been victims of intimate partner violence. In this descriptive, qualitative and exploratory study, we have compiled the expert voices of various social workers from urban and rural areas of Spain using a questionnaire and semi-structured interviews. The results reveal the role of the family and social workers in early detection, together with the need to provide a more efficient professional response, and to create specific resources and devices to provide comprehensive, individualised solutions for each woman.

La violencia de género en relaciones de pareja o expareja contra mujeres mayores es un problema invisibilizado en España, el cual requiere la implicación de las instituciones, los profesionales y las familias. La presente investigación pretende observar las prácticas de trabajadores sociales respecto a este problema y cómo proponen un trabajo social ético y eficaz con mujeres mayores que han sido víctimas de esta violencia de género. En este estudio descriptivo, cualitativo y exploratorio se ha recogido voces expertas de trabajadores sociales de áreas urbanas y rurales de España usando un cuestionario y entrevistas semiestructuradas. Los resultados muestran el rol de la familia y de los trabajadores sociales para una temprana detección, junto con la necesidad de una respuesta más eficiente y la creación de recursos específicos que provean de soluciones individuales e integrales para cada mujer.

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Introduction

The project in which this research is included aims to contribute to the critical analysis of social policies intended to help women who suffer various types of gender violence: in this case, Intimate Partner Violence against Older Women (IPVoW). The objectives we set were to find out how social work professionals detect IPVoW, identify the professional responses to it and detect instances of

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good institutional and professional practice, which enable us to suggest possible improvements, with the eventual aim of contributing towards creating fair, inclusive, and egalitarian societies. Our line of research focused specifically on learning about the impact of IPV on the lives of older women, since, according to the General Council of the Judiciary (GCJ) (2022), one in 10 women murdered in Spain was over the age of 60, a little-known statistic which has remained unchanged since records began (in 2003).

For this reason, a State Pact was established with the intention 'to improve assistance, help and protection, with special attention to the most vulnerable groups of women, including older women, migrant women, women with a disability, women from ethnic minorities and women residing in rural areas' (Government Delegation against Gender Violence [GDGV], 2019a, p. 7).

The latest Spanish Macro-survey (GDGV, 2020) highlighted the need for these measures, since 8.5% of women aged 65 or over have suffered physical and/or sexual violence from a partner at some time, with 22.9% experiencing some type of psychological violence, 10.1% emotional violence and 5.2% economic violence. As regards the consequences suffered, the Macro-survey reports that 28.2% of women over 65 who responded to the survey expressed fear of their partner.

According to the GCJ (2022), although many women murdered by their partners had not filed a charge of gender violence, these charges rose by 10% (49,479 complaints) in the fourth quarter of 2022, with complaints filed by women over 65 years of age representing 8.2% of the total. This situation was worsened during the COVID-19 pandemic, since the lockdown strengthened the mechanisms used by the aggressors (such as isolation, justification or control) to exert violence against their partners in ways which were difficult to trace (Lorente et al., 2022).

In Spain, the Comprehensive Law 1/2004 classified violence against women as gender violence. This classification represented a key change when it came to perceiving and addressing this violence, since it is exercised against women simply because they are women. The legislation in Spain is among the most pioneering in the world, because since 1999, laws have been passed to promote social policies and care resources for this group, which have improved, but not completely solved, the problem.

Literature review

Worldwide, the literature on violence against women is extensive, with contributions from a range of different disciplines. The field of social work has produced works focused both on the professional response (Colarossi, 2005; Ekström, 2018; Elboj & Ruíz, 2010; Lundberg & Bergmark, 2021; Piedra et al., 2018; Tam et al., 2016) and on aspects arising from study and intervention in this area (Cordero et al., 2017; Grossman & Lundy, 2007; Leburu-Masigo, 2020; Melgar et al., 2021; Ríos Campos, 2010).

However, despite the fact that this issue is not new, the situation of IPVoW has remained hidden compared with the exposure given to the experiences of young women and adult women with young children (Damonti & Iturbide-Rodrigo, 2021; Nägele et al., 2010). In fact, until a couple of decades ago, older women were mostly left out of studies and statistics on gender violence (Meyer et al., 2020). The few in which they were mentioned dealt with the abuse of older women by caregivers, depicting older women as fragile and dependent, a fact which is often overlooked in violence in relationships or ex-partners (Nägele et al., 2010; Wilke & Vinton, 2005).

As a result, researchers and professionals from various countries have aimed to raise awareness through studies and articles illustrating various aspects of this situation, with questions beginning to appear about the 'invisibility' of older women (Grunfeld et al., 1996; Whittaker, 1995), the relationship between IPVoW and health (Mouton, 2003), the responses that these women receive from specialised services (Ockleford et al., 2003), the reasons why older women remain in relationships when violence has been used against them (Zink et al., 2003), or the different types of violence used against them and their repercussions (Band-Winterstein & Avieli, 2022), among others.

At the European institutional level, the Daphne STOP Violence Against Older Women Project stands out, in which the reports Intimate Partner Violence Against Older Women (Nägele et al., 2010), and Prevalence Study of Abuse and Violence against Older Women. Results of a Multi-cultural Survey in Austria, Belgium, Finland, Lithuania, and Portugal (Luoma et al., 2011) were presented.

In Spain, there are recent studies, on both a national and local level, which highlight characteristics, age-associated problems and the institutional responses, as well as social and legal issues (Aragonese Institute for Women, 2018; Damonti & Iturbide-Rodrigo, 2021; Ferradans, 2021; GDGV, 2019b; Meneses et al., 2018; Sepúlveda-Navarrete, 2018).

Nevertheless, although social workers are the reference professionals in most Social Services and other social entities, and are the ones who carry out deal different programs with older women, the work of the Social Services has only been analysed in one study, and this from the point of view of older women (GDGV, 2019b). Against this background, the present work addresses the professional perspective of social workers facing this problem and the difficulties they encounter, and suggests some proposals for intervention.

Methods

This article is an offshoot of the research carried out within the framework of the project *Gender Violence in a Context of Changes: Challenges for an Analysis from a Gender Perspective*. In this article we looked into the point of view of social workers on training and experience in IPVoW. We were interested in knowing the difficulties they encounter in detecting and then intervening in these cases, as well as the needs and challenges they face and the suggestions for improvement they propose.

This ethnographic project combines quantitative (online survey) and qualitative (semi-structured in-depth interviews) data collection techniques. Both are complementary, and provide either more specific or more generic responses depending on the cases (Bryman, 2012).

Our method can be described as abduction (Bryman, 2012), as it allowed us to identify multiple realities that may be found in the data or in particular observations. We started by open-coding the interviews, which were discussed by the researchers to find patterns, contrasting their answers with the survey and bibliography to find out how social workers responded to the needs of older women who suffer intimate partner violence. As a result, we defined three major categories of analysis: the detection of violence, the subsequent professional action, and the resources and needs of social workers to be able to perform these functions.

Also, feminist methodologies have been at the forefront of our analysis because 'they have transformed the main academic disciplines, shifting attention to previously undervalued or neglected topics, and changing priorities and approaches in those that have previously been studied' (Cuklanz & Rodríguez, 2020, p. 201).

Consistent with this methodology, we express our commitment to research that empowers those who work daily with older women who suffer gender violence, and legitimises their discourses and experiences.

Sample

The research sample of the questionnaire included 60 social workers from Andalusia, Spain. The majority (74.34%) worked in public administration (general), followed by specialised public administration in the field of gender (15.93%), NGOs (11.5%), freelance (3.54%) and NGOs specialising in gender (0.88%). 86.73% identified themselves as female, 13.27% as male, and none in other categories.

The other main basis for the research was provided by the in-depth interviews carried out with seven social workers, all women, who were selected intentionally using sampling criteria (Patton, 2002) for their expert knowledge and professional activity. We considered them as key informants since they gave us a representative sample of the different cases which are dealt with by the

institutional resources. They were selected according to the following criteria: (a) working in resources of various kinds, both public and private; (b) with over 10 years of experience in this field and (c) working with older women and/or victims of gender violence. Two of them are heads of department in NGOs (E1, E2), and of the rest, 2 work in municipal services (E6, E7), 2 in health services (E4, E5) and 1 in the care of elderly people (E3). The interviews were conducted between May and September 2022 in the provinces of Cádiz and Granada (Spain), lasting for an average of 55 minutes each. The interviews were conducted by the authors of this study.

Instruments

The questionnaire was designed by the research team, and consists of 16 multiple-choice questions clustered around 3 main areas: (1) the detection of IPVoW, (2) the actions carried out by professionals when they detect a situation of this type, and (3) the resources available and those they consider necessary to intervene in the cases detected. This, in turn, allowed us to systematise the data to be later analysed and interpreted (Escobar & Bonilla-Jiménez, 2017). The questionnaire was sent to a group of professionals who, in turn, resent the questionnaire link to other colleagues. Information about the research was sent to all the participants via email, with a link given to access the questionnaire, which was hosted by LimeSurvey on the University of Granada website between May and June 2022. To analyse the quantitative data, we used the descriptive statistics from the information provided by this program. Our initial exploration of the problem aimed to generate study categories to be used in the qualitative part of the research, and it also enabled us to carry out a triangulation of sources to validate the findings and conclusions of the study.

We carried out the in-depth interviews at the interviewees' workplaces – only one was conducted at a different venue – and they were arranged in advance to guarantee the conditions of privacy and exclusivity, and to avoid distractions. They were digitally recorded, transcribed and subsequently analysed using Atlas.ti.8 software.

To ensure the ethical guidelines for this study were followed, an informed consent was signed in each case. They gave their consent to the results of the study being made public in a journal article, and we allowed them to contact us if they had any questions.

In addition to the personal and institutional identification data, the interviewees were asked to describe their work, such as the problems of the people or groups they dealt with, how they detected IPVoW, and how subsequent actions, coordination and proposals for improvement were conducted with older women.

Results

Older women are the least visible group and those who have endured IPV for the longest time (GDGV, 2019b; Nägele et al., 2010). They are also the ones who least ask for help, denounce or request a restraining order, even though they may have suffered violence for decades. The institutional bodies where they seek help usually establish a fixed itinerary (Dodier and Bardot, 2009 cited in Casado-Neira & Martínez, 2016) which it is very difficult to escape from, and which brings disastrous consequences if they do so, since it re-victimises women (Casado-Neira & Martínez, 2016). This situation highlights both their potential passivity and the factors that make the gender issue so unique.

'Detection is difficult'. Detection of IPV towards older women according to the professional experience of social workers

In the questionnaire, 65.38% responded that they find cases of IPVoW in their daily work, compared with 20.19% who stated it was not a usual occurrence, and a further 2.88% reported they had

detected cases of such violence, but that they were not within their sphere of professional competence and were unable to intervene.

The professionals also stated that this type of violence was detected most by community social services (33.63%), followed by workers at the Women's Information Centres (26,55%). On another level, the women themselves (26.55%) and their relatives (23%) were the ones who became aware of the situation and decided to take action.

These survey data contradict the opinion given by social workers in the municipal Social Services, who work in more general fields (E6, E7), and who say they find these cases difficult to detect and that they are mostly detected by services specialised in violence. According to them, when women go to a Women's Centre, they do so because they are already aware of their situation.

'They've internalised the violence as a part of their way of life'. Cultural normalisation of violence

In the interviews, the main difficulty for detecting IPVoW was the normalisation of gender violence by society in general, which is corroborated by the women, their families, and even the professionals themselves. Additionally, it is not easy to gain access to this age group to work against gender violence, added to the fact that the institutions are poorly prepared to meet the needs of these victims of IPV.

> Older women whose marriage has always been difficult often see it as part of the relationship. Detection is difficult because they're very uncommunicative, and they've internalised the violence as a part of their way of life. (E3)

> What family members normally do is to play down the situation, saying things like: 'he isn't strong enough anymore', or 'don't take any notice of him, he's been like this all his life'. (E2)

This perception coincides with the data from our survey, in which 44.25% responded that 'socialisation in couple relationships minimises the perception of abuse', and this was considered the main external obstacle to detecting IPVoW. Another factor that makes detection difficult is the fact that some women are afraid to make their experiences known. Likewise, the families of older women can be key players for change. However, despite having experienced the violence first-hand and witnessing the woman's suffering, many family members, rather than getting involved, often help perpetuate the situation. One social worker commented:

> Another difficulty is fear, because it lasts for many years and is a kind of long-term process of brainwashing. The children sometimes do nothing to stop the violence, because if the mother leaves, who's going to look after the father? (E4)

'We're often too busy to detect it'. Importance of institutional support

Sometimes the institution where social workers carry out their work does not always allow sufficient time for them to detect the violence, which is often obscured by other problems. For most women, it is not easy to speak about violence, especially if they are in the pre-contemplative stage (Alexander et al., 2009), when they are not fully aware of the problem, and feel shame or fear. For this reason, sufficient time is required for the monitoring and detection work, as well as active listening and a clear knowledge of the indicators of gender violence. One of the interviewees commented:

> […] We're tired when we arrive, and we're often too busy to detect it. If we could do more monitoring, more intervention with families, we would detect much more. (E7)

Those who completed the questionnaire also said detection was difficult, some for personal reasons and others for reasons related to the organisations or institutions where they worked, but in both cases, these difficulties impeded detection (see Table 1).

Table 1. Difficulties for detection.

Difficulties	Percentage
Lack of training on gender violence towards older women	62.83%
Lack of support from relatives, colleagues and the victim herself to continue once violence has been detected	57.52%
Fears about not knowing what will happen after detection	42.48%
Confusing situations of conflict with situations of gender violence	23.89%
Not knowing if alarm signals are definite	15.04%
Not feeling supported by the institution where I work	13.27%
It is not common to identify an older woman as a possible victim	10.62%

Source: Authors' own source.

'This woman must have lived her whole life subjugated by that man'. Identification of IPVoW: indicators and difficulties

As can be noted, although the percentage is low (10.62%), it is a worrying fact that there are still professionals who do not identify older women as possible victims of IPV. 38.94% also stated that IPVoW was sometimes confused with certain traits considered typical of old age (irritability, cognitive deterioration or fragility, among others).

Despite these difficulties, many social workers participating in the study have been able to detect cases of IPVoW using a series of signs and indicators that have allowed them to recognise and assess the situation, although, for them, the signs are much clearer in younger women (see Table 2).

In the interviews, a similar conclusion can be drawn, since the social workers take into account not only their knowledge and observation of what the women tell them, but also the women's non-verbal communication and, occasionally, that of their partners, conveying, for instance, incoherence, financial dependence, lack of participation in the community, the presence of chronic diseases, the incapacity to take their own decisions or obvious displays of control from the men:

> You see situations that tell you that the person may be at risk, when they talk about their partner […]. Also, the relationship with the children, the support by the family, whether she decides for herself, how she spends the money she has earned […] all these things give you clues. (E4)

They also observe the patriarchal power exercised by some men not only towards the older women who experience IPV, but also towards the social workers themselves:

> (…) When you see a person [a man] who's really arrogant. What's more, many of them look down on us, young, female social workers, and try to speak to us from a position of power – they treat us with contempt, and some have even mistreated us […]. And then you meet the woman and you understand it, because this woman must have lived her whole life subjugated by that man. (E6)

Despite the fact that many older women do not recognise the violence they are experiencing, others are able to overcome barriers in identifying IPV and seek help, give clear signs of what is happening to them and directly request support to escape from the relationship. In other cases, thanks to the intervention of the social worker, they are able to recognise the situation they are going through:

> The first woman, the first case I dealt with 22 years ago was Grandma Maria, who sat down and told me that she couldn't put up with it anymore. (E4)

Table 2. Indicators and warning signs of violence.

Options	Women	Older women
Taking over and/or controlling their income, or other similar signs	53.98%	
Continuous complaints about the partner's behaviour	47.79%	
Emotional liability when asked about past events	40.71%	
Strongly established sexualisation of gender roles. Traditional gender role	30.97%	57.52%
Evasion if the situation is revealed or unwillingness to go ahead with the intervention	23.01%	33.63%
Constant bruising	4.42%	
Social isolation	2.65%	61.06%

Source: Authors' own source.

'It's gone on throughout their lives'. Perceptions about older women and IPV

In some cases, older women were identified as financially dependent on their partners, not playing an active part in society, and sharing traditional thoughts about partner relationships, the family and their role in society, which may be closely linked to the normalisation of gender violence. Some comments were also made referring to age and living in rural areas:

> Many of the people lived and worked in the country, and in rural areas the rule is 'what happens at home stays at home', which is very typical in older people. […] That's why older women don't report it (…). (E7)

Regarding the types of violence experienced, the interviewees commented that:

> The violence we've seen most in older women is psychological, although, in the past, they must have suffered physical or sexual violence (…) and in some ways, it gets worse at this stage. (E1)

> The most notable effect is financial mistreatment, taking control of her pensions, not giving her what she needs, not letting her do what she wants with her money. (E5)

'To help generate trust'. Professional action after the detection of IPVoW

There is no single, standardised procedure to act after detection; the functions and competencies change depending on the type of institution. As a result, most of the professionals surveyed agree that what they do first after detecting IPVoW is to interview the woman to see how aware she is of IPV, estimate the danger and work out what stage of the cycle of violence she is at (58.41%). Next, they consult with their superior or the rest of the team to agree on what the next step should be, thus establishing the institutional coordination and support (42.48%). The case may then be passed on to specialised services (41.59%), if a health centre or municipal service is also involved.

The same occurs when the situation is reported to the social or legal authorities or the police (19.47%). In addition, some professionals report that they contact the family (12.39%). However, we consider it worrying that, although the figures are very low (4.42%), some professionals do not take any formal action on any level after detecting a case or simply focus their attention on their intervention plan without taking account of the problem of violence (3.54%). The interviewees also pointed to similar patterns. They told us that they usually refer women to services specialised in gender violence, although they sometimes carry out the intervention and follow-up themselves.

> When I see a case where the couple come to the appointment together, I try to arrange one for the woman on her own […] to make her feel useful, to generate trust, to feel that she's important and you're answering her questions. So, it's easier for her to tell you if there's anything else. (E7)

According to one professional, 'Due to that mentality, they're not the ones who make the move, no matter how much violence they've suffered' (E6), and they therefore highlight the importance of working with women to raise awareness of situations of violence and the importance of the processes of support and accompaniment, even in cases where the women decide not to report it.

However, some professionals hold ageist beliefs and attitudes when dealing with IPVoW. For example, 31.86% of the people surveyed in our research considered that 'their situation of special vulnerability prevents intervention as a victim of gender violence'. Also, when they were asked to finish the sentence 'I have conflicting views on gender violence in older women because … ' (see Table 3), 19.47% responded that if they intervened, they could create new problems since unwanted loneliness is a serious problem for older women. From other responses, it can be deduced that the aggressor's quality of life when they are sick or dependent is prioritised over the women's safety (10.62%). Nonetheless, 32.74% of the professionals surveyed recognised IPVoW as a social problem and a public crime, and therefore felt no reticence in acting against it.

To report or not to report. Protecting or empowering women

One controversial issue is related to the principle of self-determination included in the code of ethics of social work. The empowerment model, for example, dictates that the decision to stay or leave a

Table 3. Aspects that conflict with a possible intervention.

Options	Percentage
The fact that the victim has to go through the pain of loss at the end of her life	32.47%
I do not usually find these types of interventions conflicting since, more than a social problem, it is a public crime	32.74%
Unwanted loneliness in older people is a serious problem, so rather than helping, you could be creating new problems by detecting and intervening in these cases	19.47%
They generally do not give their consent to intervene, so there are issues such as professional secrecy I am contravening.	19.47%
If the male aggressor is ill or disabled due to age, it would not be right to request measures that evict him from the home	10.62%
In situations where empowerment has been taken away, my intervention will be more direct	7.96%
If the request for intervention is different, I must focus on the request expressed and its expectations	4.42%

Source: Authors' own source.

violent relationship should always be made by the woman (Peled et al., 2000, cited in Alexander et al., 2009). For this reason, a certain amount of professional conflict is generated in cases in which an intervention is initiated without the woman expressly requesting it. This is reflected in the responses to the questionnaire item: 'Generally they do not give their consent to intervene, so there are issues such as professional secrecy I am contravening'. However, the Criminal Procedure Law ([1882], 2022) clearly states in Article 262 that they are obliged to report it. According to some interviewees, they only file complaints with the court or the police when it comes to flagrant situations of IPVoW, since they must do so in person due to the lack of institutional support, which creates personal and work difficulties:

> When you file a complaint, it's not done in the name of the city council, it's reported by 'so-and-so', […] there's no support from the administration in that sense. […] So, the situation must be very clear and the violence very evident or deadly, […] and not just a suspicion you might have. (E7)

Another issue in that both the survey and the interviews reflect the importance of coordination areas for intervention against IPVoW. 53.1% of those surveyed responded that they have their own coordination areas or use that of the institution for gender violence and 25.66% belong to the gender violence commission of the institution or the municipality. Only 12.39% stated they had no type of coordination body for gender violence in their institution. The interviewees also highlighted the relevance of networks for coordinating cases, although these are mainly aimed at younger women:

> We have more coordination mechanisms for younger women than older women. The fact that we have been working for many years helps, and there's a network where it's easy to share the women's situations to know where to find an answer to whatever question comes up. (E2)

'Raise awareness about IPVoW'. Resources and needs to intervene in IPVoW

The interviews illustrate a number of good practices, either carried out individually or following institutional guidelines, which make it easier to detect and intervene in situations of IPVoW. For example, some organisations are taking active steps to change the image of older people in society, which, although not specifically directed at gender violence, can counter ageism and help us to recognise this phenomenon better in older women. In the same way, recognition of the gender perspective by organisations is essential to broaden the perspective and to see the real situation of these women, in which discrimination and violence often occur on a daily basis.

Although all the interviewees pointed to the importance of receiving training in order to do their job better and be able to help women appropriately, they also complained that training is often provided outside working hours, with the professional having to give up their free time to take the course. This affects work-family reconciliation, since, as the majority of the profession are women, training during non-working hours can clash with domestic and care tasks, which are mostly carried out by women.

> There isn't enough training and we have to deal with many things without really knowing about them, unless you find it out yourself. I'm not interested in training offered outside working hours […] because your work shouldn't take up all your time. (E6)

The respondents also identified resources and techniques which they are lacking, and which should be implemented for detecting and intervening in cases of IPVoW, such as offering women specific resources (70.80%), carrying out campaigns to raise awareness about IPVoW (67.26%), paying particular attention to rural areas (62.83%) and devising coordination strategies for cases of gender violence (59.29%).

For the interviewees, it is much more difficult for older women to come forward and start to break the bonds with their abuser as the current resources are inadequate to cater for older women:

> We're short on accommodation, so there are no supervised apartments or protection for these older women – it shouldn't be a care home, since that's not the ideal place or what the women want. (E4)

Discussion

In this study, we have investigated the viewpoints of social workers as regards the action they take when encountering IPVoW. The role they play is key in making proposals and contributions to aid prompt detection and conduct subsequent interventions, and to outline the conditions needed to allow women to escape situations of violence they suffer.

When we analyse the difficulties and challenges social workers find in detecting IPVoW, it is clear that even today, a gap persists in the recognition of this phenomenon by professionals who commonly encounter gender violence in their work on a daily basis.

Our interviewees agree that IPVoW is a common occurrence but that it is harder to detect in its early stages, since these women are less willing to report the situation (GDGV, 2020). In this context, they highlight the importance of having the support of children or close family to be able to escape such situations. In addition, such a step is only possible when public policies provide the support and help that women need, and guarantee their autonomy and security.

One of the main barriers that complicate the task is the normalisation of IPVoW by these older women, their families and professionals. This is echoed in both national and international studies, which consider it as the greatest obstacle to recognising cases and seeking help (Damonti & Iturbide-Rodrigo, 2021; Meneses et al., 2018; Nägele et al., 2010; Scott et al., 2004; Zink et al., 2003).

Another obstacle is ageism, a prejudice that is widespread in Spanish society and was actually reinforced by the Covid-19 pandemic (Bravo Segal & Villar, 2020). Prejudice against older women, ignorance of IPVoW or a lack of consideration towards older women as possible victims of gender violence act as barriers both to the detection of IPVoW and to intervention (Nägele et al., 2010; Wilke & Vinton, 2005; Zink et al., 2003).

While ageism is not exclusive to social workers, their appraisal of the situation is extremely relevant, as they fulfil a central role in most of the country's social services. The social worker is normally the first professional with whom the victim makes contact, and is the first to hear their complaint, make an assessment and diagnosis, and to design a plan of social intervention (as established, for example, in article 31 of Law 9 /2016, of Social Services of Andalusia).

If we add to ageism the other institutional barriers mentioned by our interviewees, such as the high level of bureaucratisation, the large volume of cases social workers have to deal with, the limited time allowed for interviews or the difficulties in receiving ongoing training, there is an increased risk of IPVoW going unnoticed or suitable interventions not being carried out. However, the ideas and opinions of the professionals interviewed on this issue differ depending on the institutions in which they work, and on their professional experience, which can have an impact on both the recognition of risk indicators and the detection itself.

Despite these barriers, our informants point out that when cases of IPVoW are detected, they encounter problems when it comes to setting up intervention plans with older women. For

example, administrations and specialised organisations are poorly prepared to meet the needs of older women, and lack suitable resources, or that these have not been adapted to their needs since they are designed for younger women (e.g. shelters). In general, our results are in line with the literature consulted (Damonti & Iturbide-Rodrigo, 2021; GDGV, 2019b; Lundy & Grossman, 2009).

On the other hand, among good practices, we find that if the women are received well, and feel listened to and supported. Building a professional bond with the women facilitates the decision-making processes (Morales Villena & Agrela Romero, 2020; Tetterton & Farnsworth, 2011). This is key to the success of the intervention, and greatly helps to reduce the time taken for the women to 'do the rounds' of the different institutions and professionals, thus avoiding negative feelings of guilt or failure, among others.

Finally, we feel it is crucial to highlight the main contributions of our informants: (1) There is a call for more theoretical training to be able to tackle cases of IPVoW, despite the fact that, as Ekström (2018) pointed out, expertise can be concentrated around professional groups which gain experience through the work they do; (2) Methods of detection and action should be improved, adapting them to the circumstances of each older woman (Luoma et al., 2011); (3) Finally, there is an increasing demand for greater institutional responsibility to ensure that older women are given the best conditions to escape violence, and that professionals receive sufficient support to be able to carry out their work.

Behind all this, there should be a solid conviction to fully support the rights of older women to enjoy a life free of violence.

Key implications & contributions

Social work professionals must be aware that violence against older women exists, that it is a real problem, that it must be detected, and that action must be taken. When older women approach social services, it is essential to detect, assess and deal with cases of IPVoW, while, at the same time, respecting, fostering and protecting their personal autonomy.

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References

Alexander, P., Tracy, A., Radek, M., & Koverola, C. (2009). Predicting stages of change in battered women. *Journal of Interpersonal Violence*, *24*(10), 1652–1672. https://doi.org/10.1177/0886260509331494

Aragonese Institute for Women. (2018). *La violencia de género contra las mujeres mayores en la población aragonesa [Gender violence against older women in aragonese population]*. Aragon Government. https://bit.ly/3q18dtT.

Band-Winterstein, T., & Avieli, H. (2022). Older women who are sexually abused in the context of lifelong IPV. *Violence Against Women*, *28*(2), 443–464. https://doi.org/10.1177/10778012211000132

Bravo Segal, S., & Villar, F. (2020). La representación de los mayores en los medios durante la pandemia de COVID-19: ¿hacia un refuerzo del edadismo? [The portrayal of older adults in the media during the COVID-19 pandemic: Towards reinforcing ageism?]. *Revista Española de Geriatría y Gerontología*, *55*(5), 266–271. https://doi.org/10.1016/j.regg.2020.06.002

Bryman, A. (2012). *Social research methods*. Oxford University Press.

Casado-Neira, D., & Martínez, M. (2016). La víctima simulada. Identidades forzadas en la violencia de género [Compelled identities in gender violence: The simulated victim]. *Política y Sociedad*, *53*(3), 879–896. https://doi.org/10.5209/rev_POSO.2016.v53.n3.49719

Colarossi, L. (2005). A response to Danis & Lockhart: What guides social work knowledge about violence against women? *Journal of Social Work Education*, *41*(1), 147–159. https://doi.org/10.5175/JSWE.2005.200400418

Comprehensive Law 1/2004. (December 28, 2004). *On integral protection measures against gender violence*. BOE 313, December 29, 2004.

Cordero, G., López, C., & Guerrero, A. I. (2017). Otra forma de violencia de género: la instrumentalización. ¡Donde más duele! [Another form of gender violence: instrumentalization. Where it hurts the most!]. *Documentos de Trabajo Social. Revista de Trabajo y Acción Social*, *59*, 170–189.

Cuklanz, L., & Rodríguez, M. P. (2020). Metodologías Feministas: nuevas perspectivas [New perspectives in feminist methodological research]. *Investigaciones Feministas*, *11*, 201–209. https://doi.org/10.5209/infe.70122

Damonti, P., & Iturbide-Rodrigo, R. (2021). Violencia de género en la pareja en mujeres mayores. Obstáculos específicos a la búsqueda de ayuda y a la separación [Gender-based intimate partner violence against older women. Specific barriers to help seeking and separation]. *Investigaciones Feministas*, *12*(1), 225–236. https://doi.org/10.5209/infe.70214

Ekström, V. (2018). Carriers of the troublesome violence – The social services' support for female victims of domestic violence. *European Journal of Social Work*, *21*(1), 61–73. https://doi.org/10.1080/13691457.2016.1255930

Elboj, C., & Ruíz, L. (2010). Trabajo social y prevención de la violencia de género [Social work and gender violence prevention]. *Global Social Work*, *1*(2), 220–233. https://doi.org/10.30827/tsg-gsw.v1i2.912

Escobar, J., & Bonilla-Jiménez, F. I. (2017). Grupos focales: una guía conceptual y metodológica [Focus groups: A conceptual and methodological guide]. *Cuadernos Hispanoamericanos de Psicología*, *9*(1), 51–67. https://bit.ly/3pZGJ7U.

Ferradans, C. (2021). *Mujeres especialmente vulnerables ante la violencia de género: Mujeres de edad avanzada y mujeres con discapacidad [Women especially vulnerable to gender violence: Older women and women with disabilities]*. Tirant Lo Blanch.

General Council of the Judiciary. (2022). Informe Justicia dato a dato [Report Justice data to data]. Retrieved January 14, 2023, from: https://www.poderjudicial.es/cgpj/es/Temas/Estadistica-Judicial/Estudios-e-Informes/Justicia-Dato-a-Dato/.

Government Delegation against Gender Violence. (2019a). *Documento refundido de medidas del Pacto de Estado en materia de Violencia de Género [Consolidated document of measures of the State Pact on Gender Violence]*. Ministerio de la Presidencia, Relaciones con las Cortes e Igualdad. https://violenciagenero.igualdad.gob.es/pactoEstado/docs/Documento_Refundido_PEVG_2.pdf.

Government Delegation against Gender Violence. (2019b). *Estudio sobre las mujeres mayores de 65 años víctimas de violencia de género [Study on women over 65 years victims of gender violence]*. Ministerio de la Presidencia, Relaciones con

las Cortes e Igualdad. https://violenciagenero.igualdad.gob.es/violenciaEnCifras/estudios/investigaciones/2019/pdfs/Estudio_VG_Mayores_65.pdf.

Government Delegation against Gender Violence. (2020). *Macroencuesta de Violencia contra la Mujer [Macro-survey on violence against women]*. Ministerio de Igualdad. https://violenciagenero.igualdad.gob.es/violenciaEnCifras/macroencuesta2015/pdf/Macroencuesta_2019_estudio_investigacion.pdf.

Grossman, S., & Lundy, M. (2007). Domestic violence across race and ethnicity. Implications for social work practice and policy. *Violence Against Women*, *13*(10), 1029–1052. https://doi.org/10.1177/1077801207306018

Grunfeld, A., Larsson, D., Mackay, K., & Hotch, D. (1996). Domestic violence against elderly women. *Canadian Family Physician*, *42*, 1485–1493. https://pubmed.ncbi.nlm.nih.gov/8792018/.

Law 9/2016, of December 27, of Social Services of Andalusia. BOE 18, January, 21, 2017.

Leburu-Masigo, G. (2020). Re-positioning social work in the agenda to deal with violence against women and South Africa's triple challenges. *Social Work*, *56*(2), 175–189. https://doi.org/10.15270/56-2-819

Lorente, M., Luna, J., Montero, A., & Badenes, M. (2022). *Impacto de la pandemia por COVID-19 en la violencia de género en España [Impact of the COVID-19 pandemic on gender violence in Spain]*. Ministerio de Igualdad. https://violenciagenero.igualdad.gob.es/violenciaEnCifras/estudios/investigaciones/2022/estudios/impacto_covid19.htm.

Lundberg, L., & Bergmark, A. (2021). Self-perceived competence and willingness to ask about intimatepartner violence among Swedish social workers. *European Journal of Social Work*, *24*(2), 189–200. https://doi.org/10.1080/13691457.2018.1540970

Lundy, M., & Grossman, S. (2009). Domestic violence service users: A comparison of older and younger women victims. *Journal of Family Violence*, *24*(5), 279–309. https://doi.org/10.1007/s10896-009-9230-y

Luoma, M. L., Koivusilta, M., Lang, G., Enzenhofer, E., De Donder, L., Verté, D., Reingarde, J., Tamutiene, I., Ferreira-Alves, J., Santos, A. J., & Penhale, B. (2011). *Prevalence study of abuse and violence against older women. Results of a multi-cultural survey in Austria, Belgium, Finland, Lithuania, and Portugal*. National Institute for Health and Welfare (THL).

Melgar, P., Geis, G., Flecha, R., & Soler, M. (2021). Fear to retaliation: The most frequent reason for not helping victims of gender violence. *International and Multidisciplinary Journal of Social Sciences*, *1*(20), 31–50. https://doi.org/10.17583/rimcis.2021.8305

Meneses, C., Charro, B., Rúa, A., & Uroz, J. (2018). *La violencia de género en la pareja o en la expareja de mujeres mayores de 60 años [Gender violence against older women in couples or excouples]*. Universidad Pontificia Comillas ICAI-ICADE.

Meyer, S., Lasater, M., & García-Moreno, C. (2020). Violence against older women: A systematic review of qualitative literature. *PLoS One*, *15*, 1–43. https://doi.org/10.1371/journal.pone.0239560

Morales Villena, A., & Agrela Romero, B. (2020). La dimensión de género en la intervención del trabajo social [The gender dimension in social work intervention]. In J. Fombuena (Ed.), *El Trabajo Social y su acción profesional* (pp. 197–226). Neu Llibres.

Mouton, C. (2003). Intimate partner violence and health status among older women. *Violence Against Women*, *9*(12), 1465–1477. https://doi.org/10.1177/1077801203259238

Nägele, B., Böhm, U., Görgen, T., & Tóth, O. (2010). *Intimate partner violence against older women – Summary report*. Deutsche Hochschule der Polizei – European Commission.

Ockleford, E., Barnes-Holmes, Y., Morichelli, R., Morjaria, A., Scocchera, F., Furniss, F., Sdogati, C., & Barnes-Holmes, D. (2003). Mistreatment of older women in three European countries: Estimated prevalence and service responses. *Violence Against Women*, *9*(12), 1453–1464. https://doi.org/10.1177/1077801203259236

Patton, M. Q. (2002). *Qualitative research & evaluation methods*. Sage Publications.

Piedra, J., Rosa-Martín, J., & Muñoz-Domínguez, M. (2018). Intervención y prevención de la violencia de género: un acercamiento desde el trabajo social [Intervention and prevention of gender_based violence: An approach from a social work perspective]. *Global Social Work*, *8*(14), 195–216. https://doi.org/10.30827/tsg-gsw.v8i14.6595

Ríos Campos, P. (2010). Violencia de género y pensamiento profesional: Una investigación sobre la práctica del trabajo social [Violence against women and professional thinking: a research on practice in social work]. *Global Social Work*, *1*(2), 131–148. https://doi.org/10.30827/tsg-gsw.v1i2.907

Scott, M., Mckie, L., Morton, S., Seddon, E., & Wasoff, F. (2004). Older women and domestic violence in Scotland, … and for 39 years I got on with it.

Sepúlveda-Navarrete, P. (2018). Mujeres mayores y la violencia de género en la pareja en Santiago de Chile: El género y la edad en la búsqueda de ayuda [Older women and intimate partner violence in Santiago of Chile: Gender and age in help-seeking]. In Junta de Andalucía (Ed.), *Artículos científicos Congreso para el Estudio de la violencia contra las mujeres* (pp. 112–121). Consejería de Justicia e Interior. https://bit.ly/3zz1elR

Tam, D., Schleicher, K., Wu, W., Kwok, S., Thurston, W., & Dawson, M. (2016). Social work interventions on intimate partner violence against women in China. *Journal of Social Work*, *16*(2), 228–249. https://doi.org/10.1177/1468017314568745

Tetterton, S., & Farnsworth, E. (2011). Older women and intimate partner violence: Effective interventions. *Journal of Interpersonal Violence*, *26*(14), 2929–2942. https://doi.org/10.1177/0886260510390962

Whittaker, T. (1995). Violence, gender and elder abuse: Towards a feminist analysis and practice. *Journal of Gender Studies*, *4*(1), 35–45. https://doi.org/10.1080/09589236.1995.9960591

Wilke, D., & Vinton, L. (2005). The nature and impact of domestic violence across age cohorts. *Affilia. Journal of Women and Social Work*, *20*(3), 316–328. https://doi.org/10.1177/0886109905277751

Zink, T., Regan, S., Jacobson, J., & Pabst, S. (2003). Cohort, period and aging effects: A qualitative study of older women's reasons for remaining in abusive relationships. *Violence Against Women*, *9*(12), 1429–1441. https://doi.org/10.1177/1077801203259231