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RADIO 4

TRANSCRIPT OF "FILE ON 4" – "*THE LAST TABOO*"

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REPORTER:	Claire Savage
PRODUCER:	Emma Forde
EDITOR:	Gail Champion

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THE ATTACHED TRANSCRIPT WAS TYPED FROM A RECORDING AND NOT COPIED FROM AN ORIGINAL SCRIPT. BECAUSE OF THE RISK OF MISHEARING AND THE DIFFICULTY IN SOME CASES OF IDENTIFYING INDIVIDUAL SPEAKERS, THE BBC CANNOT VOUCH FOR ITS COMPLETE ACCURACY.

“FILE ON 4”

Transmission: Tuesday 20<sup>th</sup> September 2016

Repeat: Sunday 25<sup>th</sup> September 2016

Producer: Emma Forde

Reporter: Claire Savage

Editor: Gail Champion

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MUSIC

ACTUALITY - CHRISTINA SETHI POLICE TAPE

SETHI: I'm not a bad person. I know that I have sexually assaulted her, but I do have a heart.

DETECTIVE: How old was she when you actually carried out these assaults on her?

SETHI: 101.

DETECTIVE 1: 101?

SETHI: Yes.

DETECTIVE 2: And what do you think she felt about the fact that you were doing that to her?

SETHI: Scared.

SAVAGE: Detectives question a sex attacker who violated three elderly residents at the residential home where she worked. It's a shocking crime, but it's not unique. This programme has obtained police figures, which suggest a growing number of people are being subjected to sexual abuse in care settings.

GARY: You are talking about people who are very frail, very vulnerable, very often are unable to defend themselves either mentally or physically. They are perfect candidates to be victims of this type, particularly if they are not able to tell anybody what's actually taking place.

SAVAGE: And even when it's clear a crime has occurred, it seems some homes simply don't report it.

MAN: They should have reported things to the police. That hadn't been done. We all stand to be in that position whereby we have to put our parents into these homes. In essence we're putting them into homes to prevent harm from happening to them.

SAVAGE: But in this programme there is evidence that we are failing to protect some of the most vulnerable.

SIGNATURE TUNE

ACTUALITY OUTDOORS

ANGELA: What would you like to sing? What about It's A Long Way to Tipperary?

WILLIAM: Oh yes, yes.

ANGELA: [SINGS – WILLIAM JOINS IN]

SAVAGE: An older couple in their late sixties and seventies enjoying a moment. After three decades of marriage together, they noticed something was not quite right.

ANGELA: Fifteen years ago, he made a mistake in his driving and he got out of the car and said, 'I will never drive again,' and we discovered then that he had Alzheimer's and dementia. His memory loss is terrific, but his long term memory is amazing, and he is a very special person. He is very kind and very understanding with our grandchildren and absolutely adores the family and loves to be within our family unit all of the time.

SAVAGE: Angela and William (not their real names) stayed together in their home until Angela felt she needed more help to care for her husband, so he went into a local care home for a few weeks. William enjoyed it so much he moved in and at first he appeared to be happy. But after a couple of months, Angela took her husband away on holiday and noticed a change.

ANGELA: When we were away on that holiday, in the hotel where we were staying, there was a double bed and two single beds and I said, 'Well, where would you like to sleep? Shall we sleep in the double bed?' He said, 'Oh no,' and I went to kiss him, put my arms around him and he wouldn't let me, and I went to help him with his clothes and he wouldn't let me help, he wouldn't hold my hand, and that wasn't the relationship we'd had. We had a wonderful, loving relationship. I just couldn't understand it. I put it down to having Alzheimer's and dementia.

SAVAGE: But when the couple came back from their break, the real reason for the change in William's behaviour sent Angela reeling.

ANGELA: I had a call from the home to say if the police could come and see me or would I come to the home, and I agreed to go to the home, and then they explained to me that my husband had been sexually abused - not in those words, in softer words and kinder words. They went on to explain about the abuse and it was the shock for me, I found it very difficult to continue in the conversation and I remember feeling I was about to pass out and I asked to leave the room.

SAVAGE: That day when you were called to the home and the police spoke to you, talk me through what exactly they told you and who was perhaps responsible for what happened to your husband.

ANGELA: They talked about a young woman who had worked in the home and was thought quite highly of, and they had discovered that she was the person who had assaulted my husband.

SAVAGE: That young woman was Christina Sethi. She was just 25. In police interviews, she's accused of sexually assaulting three elderly residents at the home in Devon where she worked. They were aged between 70 and 101. One of them was William.

MUSIC

ACTUALITY OF POLICE INTERVIEW TAPE

DETECTIVE: How vulnerable is he then?

SETHI: He's not physically vulnerable, but he is mentally vulnerable. That is probably why I did it.

DETECTIVE: Because he wouldn't remember what you had done?

SETHI: Yeah.

DETECTIVE: So, as with the two ladies that you targeted, there was a level of vulnerability there that made them an easy target for you, and you knew they would never report you?

SETHI: Yeah.

SAVAGE: And her crimes would have gone undetected had it not been for a computer that was handed in to the police. Detective Inspector Edward Wright is with Devon and Cornwall Police.

WRIGHT: A gentleman came into the front office. He'd bought a used laptop and upon opening it up for the first time, he noticed there was some items within the deleted bin. He obviously thought that might be some music so he looked at it and then discovered it was some video footage of some elderly people being abused by a young female. So obviously, understandably that caused him quite concern, so he came into the police station and provided the laptop to some detectives, and that is what started the investigation. One investigator who's been in the police force maybe 25 years said it was some of the most atrocious footage he has ever seen in his entire police career.

SAVAGE: Why do you think she targeted these victims?

WRIGHT: They all had the latter stages of dementia and they all lacked the mental capacity to be able to communicate. Therefore, in my opinion, she has preyed on their vulnerabilities to enable her to a) commit these offences and commit these sexual acts, but b) to try and get away with it, to try and hope that these individuals would not be able to tell anybody what's been happening to them.

SAVAGE: Detectives say the footage, which Christina Sethi recorded on her mobile phone, shows her talking to the camera before turning around to the person she was supposed to be caring for and subjecting them to a degrading sexual assault. She claims she did it for a boyfriend's gratification, but the police say there was no evidence of that. They were quickly able to identify who she was from other items on her computer, including her driving licence details, but by then the abuse had been going on for several months. It happened when she worked alone on overnight shifts unsupervised.

ANGELA: When I was told about it, within a few weeks of that I had him at home for a day and I talked to him and he cried, he just cried. And he said, 'I tried to be good and I've tried to do the right thing, but I've done something wrong and I don't know what's wrong and I don't know why it's happened.'

SAVAGE: So he was blaming himself?

ANGELA: Mmm, yes, he was.

SAVAGE: And did he know why, you know, he was feeling that way?

ANGELA: He couldn't explain to me or didn't want to explain to me. One or the other. I did say at the time, why was she on her own, why had she got the freedom to walk around the home at night? And it was explained to me that they were covered by law only having two people in the home working at night time, and when everybody was settled down at night, one of that member of staff would go off to bed and they would be called for an emergency, and so this lady was free to do what she wanted - and did.

SAVAGE: Had the computer not been found, what do you think would have happened?

ANGELA: She would have continued, because she wouldn't have been found.

SAVAGE: Christina Sethi was sentenced to ten years in prison, but the Court of Appeal upped it to fifteen years. To protect the identity of the victims, there's a legal order banning naming of the home, so we can't tell you its name or exactly where it is. But we did contact them to ask why this was allowed to go undetected, and why Sethi wasn't supervised. They told us Sethi had safeguarding training and had a clean police record, that staffing levels on overnight shifts are determined by residents' needs. They acknowledged what has happened has caused distress and trauma. Devon County Council, who's responsible for protecting the welfare of residents, says a wider review showed no concerns with the home and that the risk Christina Sethi posed couldn't have been foreseen.

BOWS: I think it's one of the last taboos and I think it's a hidden issue really. Whilst we have widespread acceptance that sexual violence happens, we don't have that acceptance that it happens to older people.

SAVAGE: Hannah Bows is a senior lecturer in criminology at Teesside University. She is a leading academic on sexual crimes against the elderly. She was struck by how little data there was and has since established it is a big problem.

BOWS: I kept noticing that all the studies I was looking at and writing about were really focusing on much younger groups and so I became curious really about kind of why we had no available evidence with people older, and so I started doing a little bit of digging, realised that the crime survey for England and Wales, which is our main national victimisation survey, had a cap of 59 for this particular area, so it doesn't collect data on sexual violence victimisation in later life, you know, and it's unrealistic to assume that on your 60<sup>th</sup> birthday your risk of victimisation just completely disappears, and we know actually that it doesn't. So, you know, to still have that cap is quite surprising.

SAVAGE: Do you think that should change?

BOWS: Really, if we are going to be developing policy and practice, we need to have the evidence in order to do that and I think there is for me a real concern that if we assume people no longer experience sexual violence or that they are not at risk at a certain age, we're actually making it much more difficult for those people to come forward and report this type of abuse. Potentially, if it's happening in care homes, it's even more difficult and that for me is a real concern.

SAVAGE: When we contacted the Office for National Statistics, who run the crime survey, they told us they were already planning to extend the questions on sexual abuse to people over sixty in the autumn. Last year, Hannah Bows carried out extensive research into the number of rapes and serious sexual assaults against older people over a five year period – up to the start of 2014. Her findings show that most crimes happen in people's own homes, but after that it was in a care setting, where people are in theory protected.

BOWS: What we found when we drilled down into that data specifically was that the unrelated carer was the most common perpetrator - no great surprise there. The second most common though was an acquaintance, and that obviously could mean lots of different things - it might be another resident.

SAVAGE: And you're looking at fairly serious sexual assault?

BOWS: Yes, yeah. Only the most serious ones were included in the study, so the rape and sexual assault by penetration offences. The care home location was the second most common location for the rapes to occur, in fact 117 cases occurred in care homes, which was just over 20% of the total sample, and that is a significant finding because the only previous study in the UK which has looked at data in this kind of way was a study by Ball and Fowler, and they found no reported cases occurring in care homes when they looked at police force data, so actually this has contradicted those findings and shown that actually, not only does it happen, but it's happening at the second most common location.

SAVAGE: To build on Hannah Bows' research, File on 4 wrote to all the police forces in the UK and asked them in a Freedom of Information request how many suspected sex crimes there'd been at adult care, nursing and residential homes in the last three years. 80% came back to us and the findings were shocking. They revealed more than 2,000 sex offences reported to the police in that period, which works out at roughly two a day. While Hannah Bows' data covers the most serious sexual assaults and rapes, we looked at all sex crimes, hence our higher number. 70% of people living in these settings are aged 65 and over. We showed our results to the Chief Executive, Gary Fitzgerald, of the charity Action on Elder Abuse.

FITZGERALD: We need to recognise this can happen and this does happen, and I would guess those figures are a frightening reflection of the reality on the ground that many of us do not want to accept is happening. People actually don't want to believe it can happen to older people in the first place, and when it does happen, unfortunately they very often don't know what to do in response to it, so we're fairly confident that there's a low level of reporting of this actually taking place.

SAVAGE: Through your experience, what is the attitude of some care homes?

FITZGERALD: It varies quite considerably between care settings as to how people respond to this, and to a large degree we are talking about basic grade workers who receive limited training and who actually, if they're faced with something like this, don't know what to do, they can be paralysed in disbelief, as indeed could many many of us.

MUSIC

ANDREA: A lovely lady. I think she had had quite a hard life. When she first came she used to talk about the nuns and where she was brought up. Just absolutely lovely. I used to talk to her a lot. She used to grab my hand and say, 'You are an angel sent from God.' She used to always say that to me.

SAVAGE: Andrea was a care worker at a residential home in Salford. One of the residents she looked after was a lady in her seventies we are calling Mary. She had severe dementia and couldn't really communicate. Andrea started to notice a series of concerning incidents involving 44 year old maintenance worker Wayne Brownsey. She would find him alone with Mary in strange situations and places where he wasn't supposed to be.

ANDREA: I'd gone into a downstairs room and the resident was in the bathroom, sitting on the toilet seat, fully dressed, and Wayne Brownsey was kneeling at the side of her. I didn't say anything, I was in total shock, total shock. I'd gone straight to the wardrobe, put the clothes away and walked back out.

SAVAGE: But there were other incidents too, weren't there?

ANDREA: Uh huh. A lot of the residents always sat in the same place in the dining room and I remember looking and she wasn't there, and I said to one of the carers, 'Where is she?' and they said, 'Oh, I don't know.' I went upstairs to her room. Her room was locked. I opened her door and she was just stood there, she was naked from the waist down. He'd already left anyway, he'd already gone. So I just made sure she was all right and I got her dressed.

SAVAGE: What did you think was happening?

ANDREA: I didn't know what was happening, I just, I knew something wasn't right.

SAVAGE: Andrea thought she wouldn't be believed if she told anyone about her concerns – especially her manager, as she was in a long term relationship with Wayne Brownsey. But she did keep private notes.

ANDREA: Basically it was just the date, the time and what I'd actually seen, incidents.

SAVAGE: So to sum up, over that period of time, what collectively did you record in those diaries?

ANDREA: Basically all the different situations where I would find the resident and he was always there. There was quite a few. They wasn't really detailed, I didn't, you know, maybe I should have done, but you don't think about these things. I'd literally come home from work that day, find a bit of paper, date, time and write down basically what had happened.

SAVAGE: Why did you not call the police?

ANDREA: I don't know. Because I didn't actually have proof, it was more a gut feeling something wasn't right. Finding her in rooms where she shouldn't be. Him being there, you know. They was, you can't really accuse somebody when you haven't got any evidence to go with it. It was probably about a week after that two of the carers walked in and found him doing what he was doing.

SAVAGE: Those two staff members found Brownsey in a small communal room in another part of the home, carrying out a serious sexual assault on Mary. Do you regret not calling the police when you had that gut instinct?

ANDREA: Erm, I do and I don't, because I don't actually think anything would have happened. I think he would have probably been suspended and it would have been my word against his.

SAVAGE: When it went to court in July this year, a jury found him guilty. The judge said he'd been grooming Mary for months. Her daughter was there throughout the trial. To protect her family her words are spoken by an actress.

DAUGHTER: Thinking about my mum, some of the behavioural patterns that were reported to me, like some aggression towards staff when, you know, having a bath and things like that, or being undressed, they did report incidents where she didn't want to do those things and she didn't want to be alone in her room. You know, she would get angry towards staff that ordinarily she would have been very polite towards. Not eating her food. And it was all put down to dementia, when in reality these signals and signs could have been the signs of something else that were not picked up upon.

SAVAGE: Like sexual abuse?

DAUGHTER: Well absolutely, yeah, yeah.

SAVAGE: Staff had their suspicions, didn't they?

DAUGHTER: Having suspicions and having no concrete evidence and making serious allegations about somebody is within itself a very, very scary situation to put yourself in, and I do commend the girls for what they did. However, part of me thinks, you know, you should have gone to somebody over this. To kind of leave a vulnerable adult in a situation where potentially they were being abused, and they suspected it was what, maybe two years they suspected it for? Would you leave a child in a situation and not report it for two years if you suspected they were being sexually abused? No, you wouldn't.

SAVAGE: The care home says it regrets what happened and has rigorous reporting systems in place to deal with any inappropriate and criminal behaviour through safeguarding channels as well as a whistleblowing policy. Personal relationships between staff now have to be declared with regional management. Salford City Council,

SAVAGE cont: the local authority responsible for safeguarding, says robust policies were in place. Wayne Brownsey was sentenced to three years and nine months in prison. It's expected he'll only have to serve half. Meanwhile his legal team is appealing the length of his sentence. Brownsey's partner, who employed him, is now working at another care home. Mary died before the trial.

There is a framework in place to protect vulnerable adults. The relevant local authorities have a safeguarding duty to undertake enquiries and protect people in care from harm. The health regulator, the Care Quality Commission, inspects homes and says it always liaises with the police and safeguarding teams to support investigations. It says they have a range of enforcement powers. There is also a minimum standard all care homes should adhere to when it comes to training and recognising financial, physical and sexual abuse. But trainers we spoke to say this can be patchy. Gary Fitzgerald again from Action on Elder Abuse.

FITZGERALD: First and foremost, we need training. We need to train people on how to respond to this appropriately, so that as far as possible, an older woman in her eighties gets the same sort of infrastructure support around her that she would have got if she was in her twenties, so training is first and foremost. We've got to increase people's awareness that it does happen. We've got this ageist attitude that dismisses sex from older people and we've got to do something about that.

SAVAGE: What training is available for care staff in residential and nursing homes?

FITZGERALD: The training that's actually provided is vocational training, it is not independently verified by an outside body. So if I'm an employer and I'm under pressure because I haven't got enough staff coming in, there's a pressure on me to sign off that I have trained somebody, whether or not that training is of a high standard at all. I think one of the things we've done with our social care system is, instead of dealing with the fact that it's going to be expensive to care for an awful lot of older people, we've tried to do it on the cheap. Again, we give an illusion to people that we've got a system there that is robust, it's strong and it promotes high quality. It doesn't. It promotes low costs and there is an entirely different thing there.

SAVAGE: In cases like Christina Sethi and Wayne Brownsey, it is clear a crime has been committed, but it becomes more complex when there's sexual activity among residents who maybe lack capacity. Researcher Hannah Bows is now working alongside Edge Hill University in Lancashire to try and establish how the care industry deals with sexual acts between people who have dementia.

BOWS: From some of the interviews that I've personally done, there seems to be a lot of concern with practitioners around sexuality in care homes and how to deal with it. There's a real fear that practitioners might get it wrong, you know, and somebody might be being abused, and so because of that, there is a tendency for them to take either a no tolerance or a low tolerance approach, where they tend to kind of nip sexual relationships in the bud, so to speak, between residents and try and not really allow it to happen.

SAVAGE: And what type of ethical issues do they then stumble across?

BOWS: Well, whether to report it and who to report it to. Most of them, in fact none of them had any specific policies or guidelines on how to manage sexual relationships, so instead they would refer to the broader safeguarding policies that they had, which don't necessarily fit sexual relationships, but they would kind of try and make them fit, and they would usually say that they should refer any issues to social services. But as I said, they didn't always want to do that where they weren't sure if there was abuse going on, you know, sometimes someone with dementia may be able to consent one day and not be able to consent another. Do you report it, full stop? It's just very tricky.

#### ACTUALITY IN RESIDENTIAL HOME

KATHRYN: If you turn round until you feel the chair behind you, my darling.

SAVAGE: I am at a residential home in the city of Sunderland, where they've agreed to let us in to meet staff to see the challenges they face when protecting residents.

KATHRYN: Put your hand down on the chair arm.

SAVAGE: Care home manager Kathryn has just served up lunch.  
How many residents do you have here?

KATHRYN: We've got 33, but the majority of the ladies and gents that we look after have a level of confusion, so out of the 33, I would say 27 have some form of dementia or cognitive impairment.

When we're dealing with people with dementia and complex health needs, very often you find that their personalities do change with the dementia. So you may find somebody has never displayed any sexual tendencies, but suddenly through their disease and very often through medication, which can bring behaviours to the forefront that we are dealing with some very sensitive issues.

SAVAGE: What do you do? What action do you take?

KATHRYN: For me it very much depends on the capacity of the people who have been involved. You might have two people who have capacity and they've just enjoyed each other's company, so in that situation we would maybe have a discreet word and asked them to retire to their private rooms. At the other end of the scale you've got two people who lack capacity and have no insight and that would be managed in a different way. We would try to preserve their rights, but be very mindful that they probably lacked understanding about the situation they've just been involved in. So we would care plan it, I would discuss it with the families, we would make sure that neither of the people involved were distressed and move forward.

HUDSON: Hi there.

WOMAN: Hi!

SAVAGE: In another part of the care home, Detective Chief Inspector Shelly Hudson from Northumbria Police has dropped in to give staff extra training on how to spot sexual abuse.

HUDSON: So I have just come to talk to you today a little bit about sexual abuse of the elderly.

WORKER: If we ever had any concerns, we would definitely act upon it, we would never ignore a situation.

WORKER 2: I would have no problem ringing 999 if there was something going on at work.

SAVAGE: I asked Shelly Hudson what it was like dealing with care homes on her patch.

HUDSON: The majority of the care homes we deal with are excellent. Some care homes are less committed to safeguarding and perhaps sometimes are more financially motivated and therefore less likely to want the publicity, to want investigations, to want to attract the attention of the CQC, because ultimately it will have a financial implication to them.

SAVAGE: What issues are thrown up when a person lacks capacity in terms of the alleged perpetrator and the victim?

HUDSON: Yeah, we have lots and lots of incidents that often don't come to the police, whereby the perpetrator and the victim lack capacity. And it's not up to the care home to decide whether or not it's in the public interest, it's up to the police and the Crown Prosecution Service, because regardless of who the perpetrator is, that person is still a victim, because she doesn't have the capacity to be able to give informed consent about what's happening. And in a case like that, absolutely not, we're not going to come along and arrest the perpetrator, who is probably as frail and, you know, doesn't have capacity. But what we will do is we will make sure that the safeguarding of both individuals and other residents is paramount, and then obviously doing what we're here to do and prosecuting offenders, so we deal with it proportionally depending on the circumstances, but in terms of public interest that's our call to make.

SAVAGE: In the last financial year, the Crown Prosecution Service successfully convicted 25 people for committing sex crimes against older people. Another 21 cases were unsuccessful. Nadra Ahmed is the executive chair of the National Care Association, which represents around five thousand medium to small care homes. We asked her what she thought of our police figures that showed two thousand suspected sex crimes in the industry, including over seven hundred of the most serious assaults, such as rape.

AHMED: I think I am quite surprised. Initially I was taken aback by the figures. It is quite a worrying figure actually.

SAVAGE: Do you think some care homes might not want to acknowledge that this type of offence is happening in terms of damage limitation?

AHMED: I think that is true. I think there will be homes that may close their eyes to it, but I think that's wrong. It may be because they don't know how to deal with it; they may be worried about the consequences of it. Providers are always worried about reputation, but actually we need to be really clear as an industry that we are going along a pathway that makes sure that the people that we care for are protected from every kind of abuse, and that includes sexual abuse. We can't choose to decide not to deal with one type of abuse. If it's abuse, it's abuse.

SAVAGE: But as we have found in the making of this programme, it is not always as simple as that. Especially when it comes to resident on resident abuse and where there are issues surrounding capacity.

#### ACTUALITY OF BABY LAUGHING

GURR: What are you doing?

SAVAGE: Amy Gurr sits and nurses her five month old baby girl. By her side, sitting in his front living room in his blue standard issue overalls is maintenance worker, Colin Clarke. They used to work at the same care home together. They had a particular problem with one elderly male resident's inappropriate sexual behaviour.

GURR: He used to put his hands down residents' tops and up residents' skirts and try doing it to the staff as well.

SAVAGE: What did staff do when this happened?

GURR: They'd all report it and tell him not to do it and remove him from the area, and a lot of them knew what he was like, that he would do it to a lot of them.

SAVAGE: What did management do?

GURR: They knew what was going on and that he was doing it, because everyone reported him to them.

SAVAGE: What explanation did they give about his touching?

GURR: They just said that he was just being nice and friendly.

SAVAGE: And how sure are you that management knew?

GURR: A lot of staff reported it to them.

SAVAGE: The home had taken some steps to monitor the man's behaviour, but they weren't enough. One day Colin was confronted with a shocking incident.

CLARKE: I went into the room to do my monthly checks on waters and I noticed the gentleman sexually abusing an elderly woman in bed. I'm a man of 53 and that really shook me, because I'd never seen something like that and it was horrific to see what I seen. And I went to go out of the room and a carer was walking up the corridor.

GURR: He found me and said that something was going on in a resident's room, so we went up there and then what I witnessed was the man sitting at the side of this lady's bed, sexually assaulting her, and I saw it all with my own eyes and it was just disgusting what happened. I tried to get the man to move, but he wouldn't. It took a



SAVAGE: Detective Constable Andy Stephenson from Northamptonshire Police headed up the investigation.

STEPHENSON: I think the home should have got to grips with this very early on. The home had got documentation that identifies the fact that he was inappropriate, he was grabbing parts of female staff, grabbing his own private parts, things like that. His behaviour was just inappropriate. They should have acted on it sooner and earlier. They should have reported things to the police, and in fact the home themselves never even reported this incident to the police. It is a criminal offence.

SAVAGE: So what happened next?

STEPHENSON: From there, really an assessment was made whether there was any purpose in going ahead with a prosecution. It was very clear from quite an early stage, with the fact that dementia played such a part and the lack of capacity of both of the parties, it was kind of clear that we wouldn't be able to go down a prosecution route, because it just wouldn't be in the public interest. He didn't know what he had done and, in fairness, the victim didn't know what had occurred. We did decide that this was something that the home needed looking at in relation to how they tried to prevent him from being a risk to other people.

SAVAGE: Did you look at taking any action against the home?

STEPHENSON: Yes, we did look at the home quite closely. The home had taken steps around trying to remind him of his boundaries, things like that, and the only option I'd got to look at really was an offence of around wilful neglect and it is very, very difficult to prove that there is a wilfulness, because I'd have had to have basically shown that the home weren't doing enough or didn't do something, knowing that he was liable to assault somebody.

SAVAGE: Amy and Colin lost their jobs along with the other carer who contacted the CQC. They say they were dismissed for whistleblowing – something the company strongly denies. The group that runs the home, Avery Health Care, says it worked promptly with the agencies involved to resolve the issues in this case, and it

SAVAGE cont: maintains an open and transparent operation – it runs a confidential whistleblowing telephone line for staff, residents and their families. The local authority responsible for safeguarding - Northamptonshire County Council - says it investigates all allegations of abuse in line with multi-agency safeguarding procedures. The Association of Directors of Adult Social Services – ADASS – have told us they don't know how many adult safeguarding referrals there are in relation to sex abuse at a care setting, but our police figures show suspected sex assaults in these homes are increasing in the years we looked at. That might be because people are getting better at reporting these type of crimes or it could mean more are happening. We don't know. Either way. Hannah Bows says we all need to admit there's a real problem before anything can be done about it.

BOWS: There is no age at which you can expect to no longer be at risk of experiencing sexual victimisation. We know from my study and your own findings that actually this happens in later life, and one of the reasons I think we are uncomfortable with it is that we don't have that awareness, and the more we talk about it, the more we are open and listen to the data and discuss this issue in society, the more likely it is that we will become comfortable, the same way we have with child sexual abuse. We recognise and accept now that that happens. We need to get to that point in relation to older sexual violence as well.

MUSIC

SAVAGE: Back with Angela and her husband William, they are now looking forward to a holiday away together as they begin to rebuild their lives and try to put the horrors of what's happened behind them.

ANGELA: He is coming home to live.

SAVAGE: And why is he coming home?

ANGELA: Because we want to be together for the last years of our lives, whatever we have. That's what's important to us. I still love my husband very much and he still calls me by my name and always says, 'I love you,' and that's so important.

SAVAGE: How important is it that society knows that this type of horrific thing can go on?

ANGELA: I think society needs to know and I don't think there should be a cover up exactly on how it happened and what people did. And if I was able to shout it from the roof tops, I would. We hear it about children, what was done to children who were sexually abused. It needs to be told.

SIGNATURE TUNE