

Abuse and maltreatment in the Elderly

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Abstract

Introduction: The aging population is increasing worldwide, but the abuse and mistreatment in the elderly (often silenced forms) has also been increasing, with strong implications for their quality of life.

Objective: To identify forms of abuse and ill-treatment in the elderly, as well as the determinants of these abuses.

Methodology: This is a quantitative study, of the non-experimental, descriptive, cross-sectional type attended by 135 Portuguese elderly. It uses the Family APGAR Scale and the Question to Elicit Elder Abuse (QEEA), which was applied between January and June 2013, in the elderly residing in the central of Portugal.

Results: The data shows that 23.5% of the elderly have suffered some kind of abuse, these being especially of the emotional kind and neglect. We also found that the most abused elders were unmarried and widows, those who had lower academic qualifications, those who reported feeling lonely and less healthy and even those who perceive to integrate families with some degree of dysfunction.

Conclusion: We found that the abuse and mistreatment are present in the everyday life of many seniors and are a difficult subject to approach. The evidence, invite us to reflect on the development of intervention strategies, particularly at the levels of emotional abuse, neglect, promotion of health and family functioning in order to contribute to the reduction or extinction of abuse and ill-treatment in the elderly.

Introduction

Mistreatment, neglect and abandonment of elderly constitute a serious public health problem that is becoming increasingly visible among us and that is seriously worrying the community in general, the scientific in particular. In this sense, it seems crucial to study this issue for different reasons, but especially given the crucial increase in the elderly population in Portugal.

The population aged 65 and over in Portugal in 2011, accounted for 19.4% of the total population, an increase on previous years, since in 1960 it corresponded to 8%, and in 2001 to 16%. The aging population is undoubtedly a very disturbing demographic phenomenon in modern societies of the 21st century, caused by the imbalances between the different age groups of the population pyramid.

It is a continuous, complex and universal process, common to all living beings, but that may have a more rapid evolution in the last stage of human life making it more vulnerable. This vulnerability associated to the increasing loss of social status and consequent devaluation makes the elderly constitute a part of the population exposed to the risk of maltreatment ¹.

The mistreatment of the elderly, widely reported in recent times, both at the European and even global levels, have also increased substantially in Portugal and according to Gonçalves ², the figures recently known in our country show that this type of conduits (abuse) tripled. The Public Security Police, refers to the existence of an increase in crime in this field, but adds, does not necessarily correspond to an increase in crime, but to a greater sensitivity to the problems and practices of denunciations. In addition, the fact that older people themselves have increasingly more sense of their rights advancing to the allegations of mistreatment they suffer ³.

Actually the mistreatment of elderly represents a serious social problem, which tends to increase, especially if we take into account the dependence of these people as a result of known longevity. Such abuse is not a new development, however they have progressively increased. This is an issue that began to arouse interest to the scientific community, but, there is a lack of data on the subject, making it important to know who are the main victims, what kind of characteristics, who the aggressors are and what kind of aggression.

The United Nations (UN) defines mistreatment of the elderly, as "any single or repeated act or lack of appropriate action, occurring in any relationship where there is an expectation of trust, which causes harm or discomfort to an older person"⁴.

The concept in question, integrates various types of abuse, including physical, psychological, material and financial abuse, as well as active and passive negligence. The physical abuse is defined as the practice of injury or physical coercion and causes the elder physical injury or psychological damage⁵. Psychological abuse is the practice of mental anguish and suffering. It is inflicted, for example, through verbal abuse, insults, threats, various processes of infantilization and humiliation. The psychologically battered elderly feels fear, apathy and has difficulty making decisions. The material abuse lies in the economic or improper exploitation of the elderly and illegal use of their funds and resources. Its achieved, for example, through the financial exploitation of the elderly, the misappropriation of his assets and properties, forced alteration of their will or other legal documents and denial of access and control over their own funds and personal property. Vano¹ also features the self-neglect, neglect, improper use of savings and assets, physical and psychological violence, sexual and verbal violence.

The psychological abuse and physical abuse are extreme and unacceptable types of maltreatment, but it is the most common at the household level, and may lead to unimaginable consequences². Neglect is also a form of abuse, and studies have shown to be more constant. These correspond to forgetting the elderly and to not meet their basic needs. Examples of neglect are: lack of hygiene care, the lack of attention paid to feeding schedules and / or medication, etc⁶.

Still there is mistreatment at the structural level, which are those that result from a variety of aspects related to social inequality, since there is a culture of violence against people who disagree with the current standards of beauty, monetary and / or consumption. Mistreatment at the institutional level, are related to a distancing of the affective level, a regime that is austere and rigid and impersonality of care that are provided to the elderly.

The institutional dimension has received greater attention because as access to these institutions has increased significantly. It can happen in homes, centres of support and care for the elderly and is usually practiced by people who are paid to provide care and services to the elderly, such as nursing, vigilant and aids geared to senior centres staff. Here, the maltreatment most often inflicted on the elderly are: the existence of excessive

restrictions; the sub or overmedication; verbal aggression; financial exploitation; the infantilization; depersonalization, dehumanization and victimization.

We note that, as to the origin of abuse, it may occur from family, society / culture or the personality of the caregiver. The conducive situations of abuse may be related to stressful situations with abuse of alcohol and drugs, conflict, psychological disorders and / or experiences of the assailant⁶. It can further expand the possibility of mistreatment of the elderly, factors such as: new family formation, cohabitation, disability both physical and mental, low cognitive and functional ability, low economic power of the population, the stress and problems of the caregiver in a situation of dependency, personal problems and the prior existence of patterns of violence.

Studies have shown that the main perpetrator is a family member of the elderly making it difficult to identify, since they are afraid to report it, not only for themselves but also to protect family and friends, fearing that things may become even more unfavourable⁶. Whether the abuse is practiced in family or institutional context, Dias⁵, tells us that the effects are similar. The elderly tend to develop attitudes of guilt, low self-esteem, social isolation, more easily depressed, suffer from sleep disorders, reinforce their dependencies and increases social stigma.

Based on the data of the Portuguese Association for Victim Support⁷ to the victim sociology most commonly found corresponds to a woman between 65 and 75 years old, retired, residing in urban areas and with some social isolation. As to the aggressor, it corresponds to the spouse or children male between 35-45 years, living in situations of stress along the typology of violence towards the elderly.

Based on this we believe to be of great importance to study the phenomenon in question, taking as a starting point the following research question: What is the maltreatment experienced by Portuguese elderly and which are the most decisive factors to these abuses?

Methodology

This is a quantitative study, with descriptive-correlational characteristics. The overall objective of the study is to identify levels and types of abuse and maltreatment in the Elderly and to analyzing specifically what are the factors that most influence these maltreatments. The study sample is the not probabilistic type, for convenience and is composed of 135 persons of both sexes, aged over 65 and resident in their own or family household in the central region of Portugal. For the collected data we used a

questionnaire which includes a section with sociodemographic and health characteristics. Also, we used the Family APGAR Scale (which assesses family functioning) and the Question to Elicit Elder Abuse (QEEA) to assess maltreatment. For data processing we used the descriptive and inferential statistics through the Statistical Package Social Science program.

Discussion of Results

The results show that the sample has an age group between 65 and 95 years with a mean age of 74.46 years. 23.5% of these seniors have suffered some kind of abuse and the elderly over 75 years are the most abused to the physical, emotional, neglect and outright abuse levels. But those who have less than 75 years are more financially abused.

The data corroborates the studies of Gonçalves² when he states that the abuse often results from a number of aspects related to the greater age, inequality and social level, since there is a culture of violence against people that are not in accordance with current standards of beauty, monetary and/or consumption. We also found that female respondents are those with higher levels of abuse, both in total value, as to the physical, emotional and financial abuse, however we cannot assert that gender is associated with these abuses since the differences found are not significant. Men were those who had more abuse to the level of negligence. However the Portuguese Association for Victim Support (APA) states that, in the sociography it presents, women between 65 and 75 years old, retired and residing in urban areas are the most common victim.

In terms of marital status, most of the sample is married (60%), followed by widowed (20%), single (11.4%) and finally divorced (8.6%). 25.7% of married couples are men and 34.3% women. Overall these results are consistent with the data publicized by the INE⁸, demonstrating that there is a greater number of widowed females.

An important finding of our study is that the more perceived and manifested types of abuse are at the emotional levels and neglect. We have also seen that in relation to physical abuse, 91.4% have never suffered from them; 2.9% reported having been physically assaulted, one, two and four times respectively. With regard to emotional abuse, 45.7% was abused once, 14.3% twice, 5.7% seven times and only 10 elderly said to have never been abused. Regarding neglect, 65.7% was neglected once, 2.9% twice, 5.7% four times and 25.7% claims never to have been overlooked. Regarding financial

abuse, 80.0% claims to have suffered, 17.1% was abused once, and 2.9% was abused twice.

With regard to qualifications, we found that 54.3% had primary education, 43.3% are illiterate or can only read and write and 11.4% have secondary education. We found that the illiterate, those who only know how to read and write suffer more abuse and that the low educational attainment provides essentially physical, emotional and total abuse (aggregate score). Results are similar to those of Fernandes and Dionísio⁹ where 47.7% of the elderly had primary education and 10.9% were illiterate, with these being also the ones abused the most.

Another piece of the study is that older people who feel lonely are those who perceive more abuse of the emotional and physical type, as well as total abuse with significant statistical significance. The same was not true in relation to neglect and financial abuse. There are studies that corroborate these findings, in particular one by Chaves¹⁰ which showed that elderly people who received no visits were more likely to be abused, making this an indicator of risk of abuse. Most of our participants is considered fairly healthy, 14.3% said to be very unhealthy and only a small group (8.6%) considers themselves very healthy. We found that the least healthy elderly suffer more abuse at the physical level, unlike the healthier that have higher values on the emotional, financial and neglect.

We found that, relative to family functioning, 14.3% of the elderly respondents show a marked dysfunction, 5.7% had a moderate dysfunction and 80.0% are highly functional. The data corroborates those of studies conducted by Andrade & Martins¹¹ which showed that most elderly revealed a family relationship as being highly functional.

In the case of our study, elderly patients with dysfunctional families are the ones who suffer more physical abuse, emotional neglect and total abuse. The results of Martins¹² corroborate equally to ours since people who suffer the most abuses are the ones linked to families with higher levels of dysfunctionality.

Conclusions

The reality of maltreatment of elderly in the family context seems highly differentiated, underpinning a set of personal factors, familiar, housing and global context. Our study reinforces this paradigm, of large inequalities and the results allow a first approximation to a reality that remains more invisible than any other form of violence in our country.

Thus, the main conclusions of our study are as follows:

- 23.5% of respondents have suffered some abuse and mistreatment: The type of abuse for most is at the emotional level and negligence, contrary to physical and financial resources that are referenced by small residual groups. The most abused elderly (with statistically significant differences, $p < 0.05$) are the unmarried and widows, those who had lower academic qualifications, those who reported feeling lonely, those who perceive lower health and even those who perceive to integrate families with some dysfunction.

Considering our results and the issue in question, we propose implicative measures:

- Increased outreach and education on abuse and mistreatment of the elderly in society in general and the elderly in particular (emphasizing the emotional abuse and neglect);
- Act at the preventive level decreasing the probability of occurrence of dependency situations in the elderly, since the provision of care perceived as a kind of "burden", leads to the experiencing of both physical and emotional maltreatment and consequent tension;
- Strengthen family cohesion, functionality and solidarity between generations, (improving the quality of relationships between parents and children and the quality of marital relationships between elderly couples) since studies have shown very positive effects on family dynamics;
 - Preventing the social isolation in which many seniors live, as this potentiates the development of abusive behaviours.
 - Demand greater efficiency in interventional strategies developed by various agents and institutions responsible for the integrated management of information relating to maltreatment.

We believe to have contributed to a better understanding of abuse and mistreatment of elderly Portuguese, which will implement corrective measures that aim to a future without fear of aging, participating actively in pursuit of a LIFE with the quality it deserves.

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