

Original Article

Prevalence of Elderly Abuse in Community of Kathmandu

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ABSTRACT

Background and Objectives: Elder abuse is a single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person. Around 1 in 6 elders experience some form of abuse worldwide causing bad impact on health as well as quality life of elders. Most of the studies indicate that elder people are suffered from different types of abuse which include: neglect (isolation, abandonment and social exclusion), violation (of human, legal and medical rights), and deprivation (of choices, decisions, status, finances and respect). Thus, this research was carried out to identify the prevalence of elderly abuse and its associated factors among elderly people.

Materials and Methods: A descriptive cross sectional research design was adopted in total 60 samples who were selected by non probability purposive sampling technique. Data was collected through door to door survey using face to face interview schedule using Geriatric Mistreatment Scale (GMS). The collected data was analyzed using descriptive statistics such as frequency, percentage, mean, standard deviation and inferential statistics such as Chi-square test by

using Statistical Package of Social Science (SPSS) 16th version.

Results: The present study findings revealed that prevalence of elderly abuse was 35%. Among different types of elderly abuse, most of the respondents had faced psychological abuse (38.3%), neglect was faced by 20% of the respondents and 20% had to face financial abuse. Minority (5%) had faced physical abuse and none of the respondents had faced sexual abuse. Overall, 35% of the respondents had faced any form of the elderly abuse. The prevalence of elderly abuse had statistically significant association with living arrangement of elderly people and future saving as *p*-value was 0.045 and 0.023 respectively.

Conclusion: The study was concluded that elderly abuse is prevalent in community of Kathmandu. Therefore, the elders are at risk of getting victim of elderly abuse, so effective screening and awareness regarding prevention of elderly abuse is very essential.

Keywords- Abuse, Elderly, Prevalence

INTRODUCTION

Aging is one of the biological changes common to all living organisms. It is a gradual collapse of structure and performance of body in organisms including humans under the influence of time. During this process, many body systems' structure and function decline and this decline in their ability increases their dependence on others. Physical and psychological needs are important in old age and a healthy life

alongside special care can make this period favourable and enjoyable [1].

Elder abuse is “a single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person”. The abuse of elders occurs much frequently all over the world but remains a largely hidden problem [2].

Around 1 in 6 elders experience some form of abuse worldwide causing bad impact on health as well as quality life of elders. Most of the studies indicate that elder people are suffered from different types of abuse which include: neglect (isolation, abandonment and social exclusion), violation (of human, legal and medical rights), and deprivation (of choices, decisions, status, finances and respect) [3]. Women experience a higher prevalence of most forms of abuse. Most abuse against the elderly takes place within the home. As per many studies conducted regarding elderly abuse, sons and daughters-in-law are the offenders in over 60 % of elderly abuse [4].

According to the study conducted in America, it was found that verbal, financial mistreatment increased anxiety and loneliness symptoms and also increased the burden of chronic conditions among elders. Those who were financially mistreated had more than twice the number of difficulties with activities of daily living than those who were not mistreated [5]. It was found that the most factors associated with elder abuse were, increased age i.e. more than 80 years, being female, being widow/widower, illiterate, not having financial saving and poor health [6].

Abuse imposes bad impact on all the dimensions of health of the elderly resulting in conditions like wounds and fractures, increased susceptibility of new disease conditions, exacerbation of prior illness, anxiety, depression and posttraumatic stress disorder in the elders, and increased risk for death and suicide [5,7].

Elder abuse is not only medical and functional problem but it is also a social problem which is usually hidden as it is commonly associated with social taboos. So, people generally prefer to remain quiet about it. Elderly abuse is one of the factors that push elders to the old age home. Studies show that, in developing countries the prevalence of elderly abuse is quite higher compared to developed country [6].

In this context, elderly abuse is well documented in the Western world, and there are economic and social policies to address the issue. In the context of developing countries, including Nepal, with a lack of adequate research in this area, documentation is still limited [8].

MATERIAL AND METHODS

Descriptive A descriptive cross sectional study design was used. The research study was conducted in community of Ward number 12, Kathmandu. The study included 60 respondents above the age of 60 years. Non probability purposive sampling technique was used to select the respondents. Geriatric Mistreatment Scale(GMS),containing 22 structured questions was used, which was prepared by National Institute of Geriatrics, Mexico. The tool is reliable with the overall Cronbach’s alpha = 0.83 for the 22-item GMS [9]. Ethical consideration was maintained by taking Formal permission from Scheer Memorial Hospital College of Nursing and the

Institutional Review Committee (IRC) of Scheer Memorial Adventist Hospital. Written permission from the concerned authority of municipality and wards was obtained. Objectives of the study were explained to each respondents and informed consent was taken before the data collection. Respondents were not forced to participate in the study. Confidentiality was maintained by not sharing obtained information with others. Respondents were assured that collected data would be used for study purpose only.

All collected data were reviewed and checked daily for its completeness and accuracy. Data was organized and coded. Statistical Package for Social Science (SPSS) version 16 was used for the data analysis. Statistical tests like Descriptive statistics (mean, frequency, standard deviation and percentage) were applied. Inferential statistics i.e. Chi-square test and Fisher's Exact test were used to find association between various socio demographic variables and elderly abuse.

RESULTS

Socio-demographic characteristics of Respondents

The mean age was 71.62 years with minimum age of patient was 61 years and maximum age of patient was 89 years and standard deviation of 6.434. On the basis of different age group of respondents 30% were of age 66 – 70 years, whereas only 1.7% of the respondents were of age 86-90 years. 60- 65 (20%), 71-75 (20%), 76-80 (20%), 81-85 were 8.3%. Likewise 61.7% of the respondents were female and 38.3% of the respondents were male. Regarding the ethnicity, 83.3% of the respondents were Relatively Advantaged Janajatis, 15% were upper caste and 1.7% was disadvantaged Non Dalit Terai Caste

group. More than half of the respondents (86.7%) were Hindu, 13.3% were Buddhist.

In case of education status, majority of respondents (66.7%) were literate among which 21.7% had studied up to 8, 20% could just read and write, 13.3% had studied up to college level or above, 11.7% studied up to higher secondary level and remaining 33.3% were illiterate.

On the basis of marital status, almost all (95%) of the respondents were married among which 27% were widow/widower. Similarly, 5% of the respondents were unmarried. Regarding family type half of the respondents (50%) lived in joint family, 48.3% lived in nuclear and remaining 1.7% lived in extended family. Likewise 50% of the respondents lived with son, 26.7% of them lived with spouse, and 11.7% with daughter, 5% lived alone.

Respondent's Financial Status

Regarding financial source more than half of the respondents (83.3%) doesn't involve in any income generating activities whereas 16.7% involve in some kind of income generating activities. Most of the respondents (78.3%) have savings for future, but 21.7% have no future saving. Likewise, 76.7% of them had asset (property) of their own, whereas, 23.3% didn't have any asset.

Respondent's Current Health Status

Regarding health status of the respondents half (50%) of the respondents had suffered from chronic diseases. Among the 30 respondents who had suffered from chronic disease, maximum respondents (25%) had diabetes, 23.3% of them had high blood pressure, 21.7% had suffered from respiratory tract disease, 8.3% had heart

disease. Whereas, only 1.7% had suffered from cancer and 1.7% had arthritis. Similarly, 78.3% of the respondents didn't need assistance for performing daily activities, while 21.7% of them needed assistance. Most of the respondents (75%) didn't use any assistive device while remaining 25% of them used assistive devices.

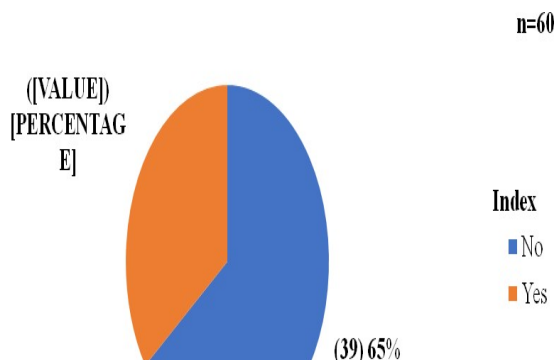


Figure 1 Prevalence of elderly abuse

Multiple Responses

Types of Elderly Abuse	Frequency	Percentage
Physical Abuse	3	5.0
Psychological Abuse	23	38.3
Neglect	12	20.0
Financial Abuse	12	20.0
Sexual Abuse	0	0

Table 1 shows that among the total respondents, 38.3% had faced psychological abuse, 20% had faced neglect, 20% faced financial abuse, and 5% had faced physical abuse.

Table 2 Association of Elderly Abuse with Socio Demographic Variable

Variables	Elderly Abuse		p-value
	No	Yes	
Age group			
60-75	27(64.3%)	15(35.7%)	0.856
76-90	12(66.7%)	6(33.3%)	
Gender			
Female	21.6(56.8%)	16(43.2%)	0.090
Male	18(78.3%)	5(21.7%)	
Education			
Illiterate	11(55%)	9(45%)	0.251
Literate	28(70%)	12(30%)	
Marital Status			
Unmarried	1(33.3%)	2(66.7%)	0.278
Married	38(66.7%)	19(33.3%)	
Family Type			
Joint	23(74.2%)	8(25.8%)	0.123
Nuclear	16(55.2%)	13(44.8%)	
Living Arrangement			
Family	37(69.8%)	16(30.2%)	0.045
Others	2(28.6%)	5(71.4%)	
Income generating activities			
No	31(62%)	19(38%)	0.470
Yes	8(80%)	2(20%)	
Future saving			
No	5(38.5%)	8(61.5%)	0.023
Yes	34(72.3%)	13(27.7%)	
Asset			
No	8(57.1%)	6(42.9%)	0.491
Yes	31(67.4%)	15(32.6%)	
Chronic disease			
No	18(60%)	12(40%)	0.417
Yes	21(70%)	9(30%)	
Use of assistive devices			
No	30(66.7%)	15(33.3%)	0.639
Yes	9(60%)	6(40%)	

Table 2 shows the association between socio demographic characteristics of the respondents and prevalence of elderly abuse. There was statistically significant association between living arrangement of respondents with elderly abuse ($p=0.045$). It means that elderly who lived with others than family member were more frequently abused. There was also the presence of statistical significance between prevalence of elderly abuse with future saving ($p=0.023$). It indicates that elderly who don't have future saving of money are more abused. Living arrangement, future saving were associated factors of elderly abuse.

DISCUSSION

In the present study the prevalence of elderly abuse was 35% which is consistent to the findings by Chaurasia et al., done in Maharashtra, which is also 35% [10]. The result is also consistent to the findings of study on prevalence of elderly abuse done in Macedonia by Peshevska et al., which is 32% [11]. However, the prevalence of this study is found to be higher in comparison to other research done in India, which showed only 11% of the elderly had faced abuse and in Portugal 12.3% of the elders experienced abuse [4,12]. At the other hand, this finding was much lower than the finding of Morowati et al., in Iran which was 79.6%. The finding of this study was even lower in comparison to previous study done in rural part of Nepal by Yadav et al., which showed 61.7% prevalence of elderly abuse [13]. This inconsistency may be due difference in development condition of country, awareness and different cultural background.

Regarding physical abuse, current study revealed that 5% of the respondents had faced physical abuse. The finding was

supported by the study of Wu L et al., (2012) in China which showed 4.8% physical abuse and also by the study of Peshevska et al., in Macedonia where prevalence of physical abuse was 5.7% [11, 14]. While the study done by Yadav U et al., in Butwal showed the prevalence of physical abuse, 1.42%, which was lesser than the present study [15].

Similarly, regarding psychological abuse, it was the most prevalent abuse (38.3%) in present study. This was similar to the study by Bra MA et al., in Pokhara and also to the study by Kashfi SM et al., in which the prevalence of psychological abuse was 34.9% and 41.2% respectively [1,6]. However, according to the study of Burnes D et al., the prevalence of psychological abuse was 4.6% in New York which was lesser than present study [17]. However, the result was higher in comparison to present study in study done by Kaur J et al., where psychological abuse was faced by 71% respondents [18].

In the context of neglect in the present study, 20% of the respondents had faced neglect which was more than the study by Skirbekk V et al., in India, which was 5.2% [4]. However, the result was higher than this study in most of the studies. According to the study in Iran by Kashfi SM et al., the prevalence of neglect was 57.5% [1].

Regarding financial abuse the results of present study was similar to the study by Chaurasia et al., done in Maharashtra, where financial abuse was 22.5% and 23% in Iran in the study by Kashfi SM et al., [1,10]. However, in the study by Chalise HN et al., 10.2% had faced financial abuse [19].

In the context of sexual abuse, none of the respondents had faced it. But, in the study by Peshevska DJ et al., 1.3% had faced sexual

abuse in Macedonia, 0.2% in Portugal according to the study by Gil APM et al., at Portugal and 0.1% had faced sexual abuse in the study by Sooryanarayana R et al., in Malaysia [11,12,20]. This means that the prevalence of sexual abuse is higher in other studies in comparison to present study, however, the prevalence of sexual abuse is lower even in other countries in contrast to other types of elderly abuse.

In the present study there was statistically significant association between living arrangement of respondents ($p=0.045$) and future saving ($p=0.023$) with prevalence of elderly abuse. However in the research by Ramalingam A et al., in India, there were significant association between prevalence of elderly abuse with age ($p=0.023$), gender ($p=0.034$), education (highly significant $p=0.001$), marital status ($p=0.01$), living arrangement ($p=0.01$) on the basis of chi-square test [21].

CONCLUSION

Finding regarding the prevalence of elderly abuse, most the respondents had faced psychological abuse (38.3%), neglect was faced by 20% of the respondents and 20% had to face financial abuse. Minority (5%) had faced physical abuse and none of the respondents had faced sexual abuse. Overall, 35% of the respondents had faced any form of the elderly abuse.

Based on the findings, it is concluded that there is prevalence of elderly abuse in community of Kathmandu. Among different types of elderly abuse, maximum elders had to face psychological abuse. Therefore, the elders are at risk of getting victim of elderly abuse, so effective screening and awareness regarding prevention of elderly abuse is very essential.

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